Case 16-34230 Doc 1 Filed 10/26/16 Entered 10/26/16 17:28:01 Desc Main Document Page 1 of 74

Fill in this information to identify your case:	
United States Bankruptcy Court for the:	
Northern District of: Illinois (State)	
Case number (if known)	Chapter you are filing under:
	Chapter 7 Chapter 11
	Chapter 12 Chapter 13

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use *you* and *Debtor 1* to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use *you* to ask for information from both debtors. For example, if a form asks, "Do you own a car, "the answer would be *yes* if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Pa	rt 1: Identify Yourself		
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	Your full name	Carlos	
		First name	First name
	Write the name that is on	R.	
	your government-issued picture identification (for	Middle name	Middle name
	example, your driver's	Ortiz	
	license or passport	Last name	Last name
	Bring your picture identification to your meeting with the trustee.	Suffix (Sr., Jr., II, III)	Suffix (Sr., Jr., II, III)
2.	All other names you		
	have used in the	First name	First name
l	last 8 years Include your married or maiden names.		
		Middle name	Middle name
		Last name	Last name
		First name	First name
		Middle name	Middle name
		Last name	Last name
3.	Only the last 4 digits of your	XXX - XX- 8967	xxx - xx-
	Social Security number or federal	OR	OR
	Individual Taxpayer Identification	9 xx - xx-	9 xx - xx-
	number (ITIN)		

Case 16-34230 Doc 1 Filed 10/26/16 Entered 10/26/16 17:28:01 Desc Main Document Page 2 of 74

De	ebtor 1 <u>Carlos</u>	R.	Ortiz	Case number (if k	nown)	
	First Name	Middle Name	Last Name			
		About Debtor 1:		About Deb	otor 2 (Spouse Only	y in a Joint Case):
4.	Any business names and Employer	I have not used any busine	ess names or EINs.	I have no	ot used any business nam	nes or EINs.
	Identification Numbers (EIN) you have used in the	Business name		Business n	ame	
	last 8 years	Business name		Business n	ame	
	Include trade names and doing business as names	EIN		EIN		
		EIN		EIN		
5.	Where you live			If Debtor 2	lives at a different addr	ess:
		A404 S. maplewood Number Street		Number	Street	
		Chicago Illinois	60632			
		City State	Zip Code	City	State	Zip Code
		Cook County		County		
		If your mailing address is diffill it in here. Note that the couthis mailing address.	fferent from the one above, irt will send any notices to you at		mailing address is diffe that the court will send a	
		Number Street		Number	Street	
		City State	Zip Code	City	State	Zip Code
6.	Why you are	Check one:		Check one:		
	choosing this district to file for bankruptcy	Over the last 180 days be lived in this district longer	efore filing this petition, I have than in any other district.		e last 180 days before filin this district longer than in	
		I have another reason. Ex	plain. (See 28 U.S.C. §§ 1408.)	I have a	nother reason. Explain. (S	See 28 U.S.C. §§ 1408.)
				-		
				-		

Case 16-34230 Doc 1 Filed 10/26/16 Entered 10/26/16 17:28:01 Desc Main Document Page 3 of 74

Debto		R.	Ortiz		Case number (if know	m)	
Don't O	First Name	Middle Name					
Part 2	Tell the Court Abo	out four Bankru	iptcy Case				
B: yc	ne chapter of the ankruptcy Code ou are choosing to e under		rief description of each, see <i>Noti</i> the top of page 1 and check the a		•	(b) for Individuals	: Filing for Bankruptcy (Form
	ow you will pay e fee	 ✓ I will pay the entire fee when I file my petition. Please check with the clerk's office in your local court for more details about how you may pay. Typically, if you are paying the fee yourself, you may pay with cash, cashier's check, or money order If your attorney is submitting your payment on your behalf, your attorney may pay with a credit card or check with a pre-printed address. ☐ I need to pay the fee in installments. If you choose this option, sign and attach the Application for Individuals to Pay Your Filing Fee in Installments (Official Form 103A). ☐ I request that my fee be waived (You may request this option only if you are filing for Chapter 7. By law, a judge may, but is not required to, waive your fee, and may do so only if your income is less than 150% of the official poverty line that applies to your family size and you are unable to pay the fee in installments). If you choose this option, you must fill out the Application to Have the Chapter 7 Filing Fee Waived (Official Form 103B) and file it with your petition. 				ne fee yourself, you omitting your payment orinted address. tach the <i>Application for</i> e filing for Chapter 7. nly if your income is a you are unable to pay	
ba	ave you filed for ankruptcy within e last 8 years?	No. Yes. District District District	Northern District of Illinois Northern District of Illinois Northern District of Illinois	WhenWhenWhen	12/3/2014 MM / DD / YYYY 5/15/2014 MM / DD / YYYY 3/25/2016 MM / DD / YYYY	Case number _ Case number _ Case number _	14-43251 14-18381 14-10384
ca be sp fil yo bu	re any bankruptcy ases pending or eing filed by a bouse who is not ing this case with ou, or by a usiness partner, or y an affiliate?	✓ No. Yes. Debtor District Debtor District		<u>W</u> hen <u>W</u> hen	MM / DD / YYYY	Relationship to y Case number, if Relationship to y Case number, if	known you
	o you rent your sidence?	✓ No.	12. landlord obtained an eviction judg Go to line 12. Fill out <i>Initial Statement About an</i> this bankruptcy petition.				

Case 16-34230 Doc 1 Filed 10/26/16 Entered 10/26/16 17:28:01 Desc Main Document Page 4 of 74

De	btor 1 Carlos		R.		Ortiz	Case number (ii	f known)		
	First Name				Last Name				
Pai	Report About An	y Bus	sinesse	es You Own as a S	Sole Proprieto	r			
	Are you a sole proprietor of any full- or part-time business? A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC. If you have more than one sole proprietorship, use a		No. Yes.	Go to Part 4. Name and location of business, if an Number City Check the appropriate Health Care Bu	Street Street	State Dur business: in 11 U.S.C. § 101(27A)	Zip Code	е	
	separate sheet and			Cingle Asset B	nal Estata (an defin	ned in 11 U.S.C. § 101(51	D//		
	attach it to this petition.			=					
	petition.			=	defined in 11 U.S.	- , ,,			
				Commodity Bro	ker (as defined in 1	1 U.S.C. § 101(6))			
				None of the abo	ve				
13. Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor? If you are filing under Chapter 11, the court must know whether you are a deadlines. If you indicate that you are a small business debtor, you must at operations, cash-flow statement, and federal income tax return or if any of U.S.C. § 11 16(1)(B).			ebtor, you must attach you	ır most recent bala	ance sheet, statement o	f			
	For a definition of small business		No.			T a small business debto	or according to the	definition in the	
	debtor, see 11 U.S.C. § 101(51D).		Yes.	Bankruptcy Code. I am filing under Chapt	ter 11 and I am a s	mall business debtor acco	ording to the definit	tion in the Bankruptcy (Code.
Pai	tt 4: Report if You Ow	n or	Have A	Any Hazardous Pro	operty or Any	Property That Nee	ds Immediate	Attention	
	Do you own or have any property that poses or is alleged to pose a threat of	✓	No. Yes.	What is the hazard?					
	imminent and identifiable hazard to public health or		l	If immediate attention is	needed, why is it no	eeded?			
	safety? Or do you		,	Where is the property?					
	own any property			····o·o io allo proporty :	Number	Street			
	that needs				Number	Olicci			
	immediate attention?								
	For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?				City	State	9	Zip Code	

Case 16-34230 Doc 1 Filed 10/26/16 Entered 10/26/16 17:28:01 Desc Main Document Page 5 of 74

Debtor 1 Carlos R. Ortiz Case number (if known)

First Name Middle Name Part 5: Explain Your Efforts to Receive a Briefing About Credit Counseling **About Debtor 1:** About Debtor 2 (Spouse Only in a Joint Case): You must check one: You must check one: 15. Tell the court whether you have I received a briefing from an approved credit I received a briefing from an approved credit received briefing counseling agency within the 180 days before I filed counseling agency within the 180 days before I filed about credit this bankruptcy petition, and I received a certificate of this bankruptcy petition, and I received a certificate of counseling. completion. completion. Attach a copy of the certificate and the payment plan, if any, Attach a copy of the certificate and the payment plan, if any, The law requires that that you developed with the agency. that you developed with the agency. you receive a briefing about credit I received a briefing from an approved credit I received a briefing from an approved credit counseling agency within the 180 days before I filed counseling agency within the 180 days before I filed counseling before this bankruptcy petition, but I do not have a this bankruptcy petition, but I do not have a you file for certificate of completion. certificate of completion. bankruptcy. You must truthfully check Within 14 days after you file this bankruptcy petition, Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment you MUST file a copy of the certificate and payment one of the following plan, if any. plan, if any. choices. If you cannot do so, you are I certify that I asked for credit counseling services I certify that I asked for credit counseling services not eligible to file. from an approved agency, but was unable to obtain from an approved agency, but was unable to obtain those services during the 7 days after I made my those services during the 7 days after I made my If you file anyway, request, and exigent circumstances merit a 30-day request, and exigent circumstances merit a 30-day temporary waiver of the requirement. temporary waiver of the requirement. the court can dismiss your case, you will To ask for a 30-day temporary waiver of the requirement, To ask for a 30-day temporary waiver of the requirement, lose whatever filing attach a separate sheet explaining what efforts you made to attach a separate sheet explaining what efforts you made to fee you paid, and obtain the briefing, why you were unable to obtain it before obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances you filed for bankruptcy, and what exigent circumstances your creditors can required you to file this case. required you to file this case. begin collection activities again. Your case may be dismissed if the court is dissatisfied with Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for your reasons for not receiving a briefing before you filed for bankruptcy. bankruptcy. If the court is satisfied with your reasons, you must still If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, the payment plan you developed, if any. If you do not do so, your case may be dismissed. your case may be dismissed. Any extension of the 30-day deadline is granted only for Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days. cause and is limited to a maximum of 15 days. I am not required to receive a briefing about credit I am not required to receive a briefing about credit counseling because of: counseling because of: Incapacity. I have a mental illness or a mental Incapacity. I have a mental illness or a mental deficiency that makes me incapable of deficiency that makes me incapable of realizing or making rational decisions realizing or making rational decisions about finances. Disability. My physical disability causes me to be Disability. My physical disability causes me to be unable to participate in a briefing in unable to participate in a briefing in person, by phone, or through the person, by phone, or through the internet, even after I reasonably tried internet, even after I reasonably tried to do so. to do so. Active duty. Active duty. I am currently on active military duty in I am currently on active military duty in a military combat zone. a military combat zone. If you believe you are not required to receive a briefing If you believe you are not required to receive a briefing

about credit counseling, you must file a motion for waiver of

credit counseling with the court.

about credit counseling, you must file a motion for waiver of

credit counseling with the court.

Case 16-34230 Doc 1 Filed 10/26/16 Entered 10/26/16 17:28:01 Desc Main Document Page 6 of 74

Debtor 1 Carlos	R.	Ortiz Case number	(if known)		
First Name	Middle Name lestions for Reporting Purpo	Last Name			
16. What kind of debts do you have?	 16a. Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." No. Go to line 16b. Yes. Go to line 17. 16b. Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment. No. Go to line 16c. Yes. Go to line 17. 16c. State the type of debts you owe that are not consumer debts or business debts. 				
17. Are you filing under Chapter 7? Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available for distribution to unsecured creditors?	paid that funds will be avai		perty is excluded and administrative expenses are		
18. How many creditors do you estimate that you owe?	✓ 1-49 ☐ 50-99 ☐ 100-199 ☐ 200-999	☐ 1,000-5,000 ☐ 5,001-10,000 ☐ 10,001-25,000	☐ 25,001-50,000 ☐ 50,001-100,000 ☐ More than 100,000		
19. How much do you estimate your assets to be worth?	\$0-\$50,000 \$50,001-\$100,000 \$100,001-\$500,000 \$500,001-\$1 million	\$1,000,001-\$10 million \$10,000,001-\$50 million \$50,000,001-\$100 million \$100,000,001-\$500 million	=		
20. How much do you estimate your liabilities to be?	\$0-\$50,000 \$50,001-\$100,000 \$100,001-\$500,000 \$500,001-\$1 million	\$1,000,001-\$10 million \$10,000,001-\$50 million \$50,000,001-\$100 million \$100,000,001-\$500 million			
Part 7: Sign Below					
For you	and correct. If I have chosen to file under 11,12, or 13 of title 11, United choose to proceed under Cha If no attorney represents me me fill out this document, I had I request relief in accordance I understand making a false sonnection with a bankruptcy years, or both. 18 U.S.C. §§ 2 /s/ Carlos Ortiz Signature of Debtor 1 Executed on 10/26/2016	Chapter 7, I am aware that I may I States Code. I understand the repter 7. and I did not pay or agree to pay sive obtained and read the notice rewith the chapter of title 11, United statement, concealing property, or case can result in fines up to \$25 152, 1341, 1519, and 3571.	proceed, if eligible, under Chapter 7, lief available under each chapter, and I someone who is not an attorney to help equired by 11 U.S.C. § 342(b). I States Code, specified in this petition. obtaining money or property by fraud in 0,000, or imprisonment for up to 20 ture of Debtor 2		

Case 16-34230 Doc 1 Filed 10/26/16 Entered 10/26/16 17:28:01 Desc Main Document Page 7 of 74

Debtor 1	Carlos	R.	Ortiz	Case number ((if known)
	First Name	Middle Name	Last Name		
you are by one If you a represe	ur attorney, if e represented are not ented by an ey, you do not	eligibility to proceed un the relief available und to the debtor(s) the not certify that I have no k petition is incorrect.	ider Chapter 7, 11, 12, ler each chapter for whice required by 11 U.S	or 13 of title 11, U lich the person is 6 .C. § 342(b) and, ir	hat I have informed the debtor(s) about nited States Code, and have explained eligible. I also certify that I have delivered in a case in which § 707(b)(4)(D) applies, ation in the schedules filed with the
	o file this page.	/s/ Megan Holmes Signature of Attorney t	for Debtor	Date	10/26/2016 MM / DD / YYYYY
		Megan Holmes Printed name Semrad Law Firm Firm name 11101 S. Western Aver Street	nue		
		Chicago City		Illinois State	60643 Zip Code
		Contact phone		Email address	mholmes@semradlaw.com
				Illino	ois
		Bar number		State	e

Case 16-34230 Doc 1 Filed 10/26/16 Entered 10/26/16 17:28:01 Desc Main Document Page 8 of 74

Debtor 1 Carlos First Name	R. Middle Name	Ortiz Last Name	Case number (if known)	
Additional Page		2451.1141.115		
9. Have you filed for bankruptcy within	☐ No.			
the last 8 years?	✓ Yes. District Nor	hern District of Illinois	When 8/1/2016 Case number 14-24712	
			MM / DD / YYYY	

Case 16-34230 Doc 1 Filed 10/26/16 Entered 10/26/16 17:28:01 Desc Main Document Page 9 of 74

Fill in this information to identify your case:					
Debtor 1	Carlos First Name	R. Middle Name	Ortiz Last Name	_	
Debtor 2 (Spouse, if filing) First Name	Middle Name	Last Name	_	
United States Bankruptcy Court for the:		Northern	District of Illinois (State)	_	
Case number (If known)			(State)	_	

Check if this is ar
amended filing

12/15

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new Summary and check the box at the top of this page.

Part 1: Summarize Your Assets	
	Your assets Value of what you own
1. Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B	\$0.00
1b. Copy line 62, Total personal property, from Schedule A/B	\$1,538.00
1c. Copy line 63, Total of all property on Schedule A/B	\$1,538.00
Part 2: Summarize Your Liabilities	
	Your liabilities Amount you owe
 Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D 	\$2,000.00
3. Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$10,800.00
3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$23,240.72
Your total liabilities	\$36,040.72
Part 3: Summarize Your Income and Expenses	
4. Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$3,926.48
Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22, Column A, of Schedule J	\$3,526.00

Case 16-34230 Doc 1 Filed 10/26/16 Entered 10/26/16 17:28:01 Desc Main Document Page 10 of 74

Deb	tor 1 Carlos	R.	Ortiz	Case number (if known)	
	First Name	Middle Name	Last Name		
Part	4: Answer These Q	luestions for Administi	rative and Statistical Rec	cords	
6. A ı	re you filing for bankrup	tcy under Chapters 7, 11, or	13?		
	No. You have nothing to	o report on this part of the form	. Check this box and submit this f	form to the court with your other schedules.	
Ī.	✓ Yes.				
7 10	 /hat kind of debt do you	havo2			
/. VV	_				
Ŀ	•	-	mer debts are those incurred by a out lines 8-10 for statistical purp	an individual primarily for a personal, oses. 28 U.S.C. § 159.	
		rimarily consumer debts. Yo ith your other schedules.	u have nothing to report on this page	art of the form. Check this box and submit	
	From the Statement of)	larry Cruyent Manthly Incom	ma. Cany y court total as unant manth	sh i isaa maa fram Official	₽0 500 40
		Form 122B Line 11; OR , Form	ne: Copy your total current month 122C-1 Line 14.	ny income nom Oniciai	\$2,526.19
_				_	
9.	Copy the following spe	cial categories of claims fro	m Part 4, line 6 of Schedule E/	/F:	
	From Part 4 on Schedu	le E/F, copy the following:		Total claim	
	9a. Domestic support obli	igations (Capy line 6a.)		\$700.00	
	a. Domestic support obi	igations (Copy line ba.)			
	9b. Taxes and certain other	er debts you owe the governme	ent. (Copy line 6b.)	\$10,000.00	
	9c. Claims for death or pe	ersonal injury while you were in	itoxicated. (Copy line 6c.)	\$0.00	
	9d. Student loans. (Copy	line 6f.)		\$0.00	
	9e. Obligations arising ou	t of a separation agreement or	r divorce that you did not report a	\$0.00	
	priority claims. (Copy line		,,		
	9f. Debts to pension or pr	ofit-sharing plans, and other s	imilar debts. (Copy line 6h.)	\$0.00	
	52.0 to policion of pr		2220 (30)		
	On Total Add lines On th	rough Of		\$10,700,00	

Case 16-34230 Doc 1 Filed 10/26/16 Entered 10/26/16 17:28:01 Desc Main Document Page 11 of 74

Fill in this info	rmation to identify your cas	se:				
Debtor 1	Carlos	R.		Ortiz		
	First Name	Middle N	lame	Last Name		
Debtor 2						
Spouse, if fili	ng) First Name	Middle N	lame	Last Name		
Jnited States	Bankruptcy Court for the:	Northern	D:	istrict of Illinois		
	, ,			(State)		
Case number If known)	•					
	Form 106A/B					Check if this is an amended filing
chedu	ile A/B: Prop	ertv				12
✓ No	vn or have any legal or each. Go to Part 2 s. Where is the property?	quitable interest in	any residen	ce, building, land, or similar prop	erty?	
Ye				property? Check all that apply.		laims or exemptions. Put
1.1 Str	reet address, if available, o	r other description		amily home or multi-unit building		aims Secured by Property
			Condom	on multi-unit building ninium or cooperative ctured or mobile home	Current value of the entire property?	Current value of the portion you own?
			Land	stared of mobile nome		
Nu	ımber Street			ent property	Describe the nature of	
			Timesha	are	interest (such as fee si the entireties, or a life	
Cit	ty State	Zip Code	Other _			
			Who has a one. Debtor 1	n interest in the property? Check	Check if this is co (see instructions)	mmunity property
			Debtor 2	2 only		
			Debtor 1	and Debtor 2 only		
			At least of	one of the debtors and another		
				mation you wish to add about the entification number:	s item, such as local	
If you own	or have more than one, list	here:		·		

What is the property? Check all that apply.

Who has an interest in the property? Check

At least one of the debtors and another

Other information you wish to add about this item, such as local

Duplex or multi-unit building

Condominium or cooperative

Manufactured or mobile home

Single-family home

Investment property

Land

Timeshare

Debtor 1 only Debtor 2 only

1.2

Number

City

Street address, if available, or other description

Zip Code

Street

State

Do not deduct secured claims or exemptions. Put the amount of any secured claims on *Schedule D*:

Creditors Who Have Claims Secured by Property.

Describe the nature of your ownership

interest (such as fee simple, tenancy by the entireties, or a life estate), if known.

Check if this is community property

Current value of the

page 1

portion you own?

Current value of the

(see instructions)

entire property?

Official Form 106A/B Schedule A/B: Property

Debtor 1 and Debtor 2 only

property identification number:

Case 16-34230 Doc 1 Filed 10/26/16 Entered 10/26/16 17:28:01 Desc Main Document Page 12 of 74

Debtor 1	Carlos First Name	R. Middle Name	Ortiz Last Name	_ Case number	(if known)	
	et address, if available, or oth		What is the property? Check all that and Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home Land	oply.	Do not deduct secured of the amount of any secure Creditors Who Have Clate Current value of the entire property?	·
Nun City	nber Street State	Zip Code	Investment property Timeshare Other	-	Describe the nature of interest (such as fee si the entireties, or a life	mple, tenancy by
] []]	Who has an interest in the property? Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Other information you wish to add at	er	Check if this is con (see instructions) such as local	mmunity property
		tion you own for a	roperty identification number: Il of your entries from Part 1, includi e			
Do you ov you own th	at someone else drives. If youns, trucks, tractors, sport utili	equitable interest in lease a vehicle, als	n any vehicles, whether they are regi to report it on Schedule G: Executory Co rcles			
3.1	Make Model: Year:	Chevrolet Impala 2000	Who has an interest in the prope one. Debtor 1 only	erty? Check		laims or exemptions. Put ed claims on Schedule D: nims Secured by Property.
	Approximate mileage: Other information:	148000	Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and a Check if this is community prinstructions)		Current value of the entire property? \$588.00	Current value of the portion you own? \$588.00
3.2	Make Model: Year: Approximate mileage: Other information:		Who has an interest in the prope one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and a		· ·	laims or exemptions. Put ed claims on Schedule D: eims Secured by Property. Current value of the portion you own?
			Check if this is community pr instructions)	roperty (see		

Case 16-34230 Doc 1 Filed 10/26/16 Entered 10/26/16 17:28:01 Desc Main Document Page 13 of 74

Debtor 1	Carlos First Name	R. Middle Name	Ortiz Last Name	Case number	(if known)	
3.3	Make Model: Year: Approximate mileage: Other information:		Who has an interest in the prone. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors are Check if this is communit instructions)	nd another	the amount of any see	ed claims or exemptions. Put cured claims on Schedule D: Claims Secured by Property. Current value of the portion you own?
		•	Who has an interest in the prone. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and Check if this is communit instructions) recreational vehicles, other veshing vessels, snowmobiles, more	nd another y property (see chicles, and acces	the amount of any sec Creditors Who Have Current value of the entire property?	ed claims or exemptions. Put cured claims on <i>Schedule D:</i> Claims Secured by Property. The Current value of the portion you own?
	No Yes				-	
4.1	Make Model: Year:		Who has an interest in the prone. Debtor 1 only	operty? Check	the amount of any see	ed claims or exemptions. Put cured claims on <i>Schedule D:</i> Claims Secured by Property.
	Approximate mileage: Other information:		Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors an Check if this is communit instructions)		Current value of the entire property?	e Current value of the portion you own?
4.2	Model: Year:		Who has an interest in the prone. Debtor 1 only	roperty? Check	the amount of any see	ed claims or exemptions. Put cured claims on <i>Schedule D:</i> <i>Claims Secured by Property.</i>
	Approximate mileage: Other information:		Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors an		Current value of the entire property?	ce Current value of the portion you own?
			Check if this is communit instructions) of your entries from Part 2, inc.	luding any entries		\$588.00
you ha	ive attached for Part 2. Write	that number here			▶	+

Case 16-34230 Doc 1 Filed 10/26/16 Entered 10/26/16 17:28:01 Desc Main Document Page 14 of 74

De	ebtor 1		R.	Ortiz	Case number (if known)	
_		First Name	Middle Name	Last Name		
Pa	rt 3:	Describe Y	our Personal and Househ	old Items		
D	o you	own or ha	ave any legal or equitable	interest in any of the fo	ollowing items?	Current value of the portion you own? Do not deduct secured claims or exemptions.
6	. Hous	ehold goods	and furnishings			
	Exampl	les: Major app	liances, furniture, linens, china, kitch	nenware		
	No					
✓	Yes. D	escribe	Misc. household goods and furnish	ings		\$500.00
	. Electr Exampl No		s and radios; audio, video, stereo, a	nd digital equipment; computers	s, printers, scanners; music	
$\overline{\mathbf{A}}$		escribe	Cell phone			\$150.00
_	0-11-	- 415 1 6 1				
		•	ue and figurines; paintings, prints, or ot in, or baseball card collections; othe		•	
✓	No					
	Yes. D	escribe				
		les: Sports, ph	orts and hobbies otographic, exercise, and other hob s; carpentry tools; musical instrumer		oles, golf clubs, skis; canoes	
☑	No					
靣	Yes. D	escribe				
	0. Firea Exampl		es, shotguns, ammunition, and relat	ted equipment		
⊻	No					
	Yes. D	escribe				
	1. Cloti Exampl		clothes, furs, leather coats, designer	wear, shoes, accessories		_
	No					
✓	Yes. D	escribe	Used clothing			\$100.00
		•	ewelry, costume jewelry, engagemer	nt rings, wedding rings, heirloor	n jewelry, watches, gems,	
범		escribe				7
 1		-farm animal	s			
	Exampl		s, birds, horses			
띨	No					
	Yes. D	escribe				
_	_	other persor	nal and household items you did	not already list, including any	y health aids you did not list	
띨	No					
	Yes. D	escribe				
			lue of all of your entries from Pa number here			\$750.00

Case 16-34230 Doc 1 Filed 10/26/16 Entered 10/26/16 17:28:01 Desc Main Document Page 15 of 74

Den	Carlos	N.	UTIIZ	Case number (# known)	
Dort	First Name	Middle Name	Last Name		
Part		Financial Assets any legal or equitable int	erest in any of the follow	ing?	Current value of the portion you own? Do not deduct secured claims or exemptions.
	✓ No	ve in your wallet, in your home, in a	safe deposit box, and on hand whe	n you file your petition	
17.	Deposits of money Examples: Checking, sa	avings, or other financial accounts	s; certificates of deposit; shares in counts with the same institution, list Institution name:		
	_	17.1. Checking account:	TCF Bank		\$200.00
		17.2. Checking account:			
		17.3. Savings account:			<u> </u>
		17.4. Savings account:			
		17.5. Certificates of deposit:			
		17.6. Other financial account:			
		17.7. Other financial account:			
		17.8. Other financial account:			
		17.9. Other financial account:			
18.		, or publicly traded stocks investment accounts with brokerag	ge firms, money market accounts		-
	✓ No ☐ Yes	Institution or issuer name:			
19.	Non-publicly traded s an LLC, partnership,	and joint venture	ated and unincorporated busine	-	•
	Yes. Give specific information about them	Name of entity		% of ownership:	

Case 16-34230 Doc 1 Filed 10/26/16 Entered 10/26/16 17:28:01 Desc Main Document Page 16 of 74

Debt	tor 1	Carlos	R.	Ortiz	Case number (if known)	_
		First Name	Middle Name	Last Name		
20.	Go	vernment and corp				
			nclude personal checks, cashiers'			
	Nor	n-negotiable instrume	nts are those you cannot transfer	to someone by signing o	or delivering them.	
	V	No				
	П	Yes. Give specific				
		information about	Issuer name:			
		them				
21.		irement or pension				
		imples: Interests in IR	A, ERISA, Keogh, 401(k), 403(b)	, thrift savings accounts,	or other pension or profit-sharing plans	
	✓	No	Toronton and	Landia Cara anno		
		Yes. List each	Type of account:	Institution name:		
		account	401(k) or similar plan:			
		separately.	Pension plan:			
			IRA:			
			Retirement account:			
			Keogh:			_
			Additional account:			
			Additional account:			
						_
22.		curity deposits and p			,	
	You	r snare of all unused of	leposits you have made so that yo vith landlords, prepaid rent, public	u may continue service o	or use from a company (ater), telecommunications	
		npanies, or others	vitir iaridiords, prepaid rent, public	dunines (electric, gas, w	ater), telecommunications	
	V	No		Institution name:		
	H					
	Ш	Yes	Electric:			
			Gas:			
			Heating oil:			
			Security deposit on rental unit:			-
			Prepaid rent:			
			Telephone:			
			Water:			
			Rented furniture:			
			Other:			
23.	Anı	nuities (A contract for	a periodic payment of money to y	ou, either for life or for a	number of years)	
	V	No				
	П	Yes	Issuer name and description:			
	Ч	100				

Case 16-34230 Doc 1 Filed 10/26/16 Entered 10/26/16 17:28:01 Desc Main Document Page 17 of 74

Debte	or 1 Carlos First Name	R. Middle Name	Ortiz Last Name	Case number (if known)	
24.				der a qualified state tuition program	
	26 U.S.C. §§ 530(b)(1), 529A				
	No Institution nam	ne and description. Sepa	arately file the records of any interest	ts.11 U.S.C. § 521(c):	
25.	Trusts, equitable or future exercisable for your benefit		other than anything listed in line	e 1), and rights or powers	
	✓ No				7
	Yes. Describe				
26.	Patents convrights trader	 marks_trade_secrets_a	and other intellectual property		
20.			ds from royalties and licensing agree	ements	
	✓ No				
	Yes. Describe				
					1
27.	Licenses, franchises, and c Examples: Building permits, e		les perative association holdings, liquor	licenses, professional licenses	
	✓ No				
	Yes. Describe				
		_			
B4					
Wor	ney or property owed t	o you?			Current value of the portion you own? Do not deduct secured claims or exemptions.
	Tax refunds owed to you	o you?			portion you own?
		o you?			portion you own? Do not deduct secured
	Tax refunds owed to you ✓ No — Yes. Give specific information	ation		Federal:	portion you own? Do not deduct secured
	Tax refunds owed to you No Yes. Give specific information about them, including you already filed the	ation ng whether e returns		Federal: State:	portion you own? Do not deduct secured claims or exemptions.
	Tax refunds owed to you No Yes. Give specific information about them, including	ation ng whether e returns			portion you own? Do not deduct secured claims or exemptions. \$0.00
28.	Tax refunds owed to you No Yes. Give specific information about them, including you already filed the and the tax years Family support	ation ng whether e returns	nort child support maintenance div	State: Local:	portion you own? Do not deduct secured claims or exemptions. \$0.00
28.	Tax refunds owed to you ✓ No Yes. Give specific information about them, including you already filed the and the tax years Family support Examples: Past due or lump support	ation ng whether e returns	port, child support, maintenance, div	State:	portion you own? Do not deduct secured claims or exemptions. \$0.00
28.	Tax refunds owed to you ✓ No Yes. Give specific information about them, including your already filed the and the tax years Family support Examples: Past due or lump sure	ation ng whether e returns	port, child support, maintenance, div	State: Local:	portion you own? Do not deduct secured claims or exemptions. \$0.00
28.	Tax refunds owed to you ✓ No Yes. Give specific information about them, including you already filed the and the tax years Family support Examples: Past due or lump support	ation ng whether e returns	port, child support, maintenance, div	State: Local: vorce settlement, property settlement	portion you own? Do not deduct secured claims or exemptions. \$0.00 \$0.00 \$0.00
28.	Tax refunds owed to you ✓ No Yes. Give specific information about them, including your already filed the and the tax years Family support Examples: Past due or lump sure	ation ng whether e returns	port, child support, maintenance, div	State: Local: vorce settlement, property settlement Alimony:	portion you own? Do not deduct secured claims or exemptions. \$0.00 \$0.00 \$0.00
28.	Tax refunds owed to you ✓ No Yes. Give specific information about them, including your already filed the and the tax years Family support Examples: Past due or lump sure	ation ng whether e returns	port, child support, maintenance, div	State: Local: vorce settlement, property settlement Alimony: Maintenance:	portion you own? Do not deduct secured claims or exemptions. \$0.00 \$0.00 \$0.00 \$0.00
28.	Tax refunds owed to you ✓ No Yes. Give specific information about them, including your already filed the and the tax years Family support Examples: Past due or lump sure	ation ng whether e returns	port, child support, maintenance, div	State: Local: Alimony: Maintenance: Support:	portion you own? Do not deduct secured claims or exemptions. \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00
28. 29.	Tax refunds owed to you ✓ No Yes. Give specific information about them, including you already filed the and the tax years Family support Examples: Past due or lump sure No Yes. Give specific information.	ation ng whether returns um alimony, spousal sup ation		State: Local: Vorce settlement, property settlement Alimony: Maintenance: Support: Divorce settlement: Property settlement:	portion you own? Do not deduct secured claims or exemptions. \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00
28. 29.	Tax refunds owed to you ✓ No Yes. Give specific information about them, including you already filed the and the tax years Family support Examples: Past due or lump sure No Yes. Give specific information of the tax years	ation ng whether returns um alimony, spousal sup ation	nts, disability benefits, sick pay, vacat	State: Local: Vorce settlement, property settlement Alimony: Maintenance: Support: Divorce settlement: Property settlement:	portion you own? Do not deduct secured claims or exemptions. \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00
28. 29.	Tax refunds owed to you ✓ No Yes. Give specific information about them, including you already filed the and the tax years Family support Examples: Past due or lump sure No Yes. Give specific information of the tax years	ation ng whether returns um alimony, spousal sup ation	nts, disability benefits, sick pay, vacat	State: Local: Vorce settlement, property settlement Alimony: Maintenance: Support: Divorce settlement: Property settlement:	portion you own? Do not deduct secured claims or exemptions. \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00
28. 29.	Tax refunds owed to you ✓ No ☐ Yes. Give specific informa about them, includin you already filed the and the tax years Family support Examples: Past due or lump su ✓ No ☐ Yes. Give specific informa Other amounts someone oven Examples: Unpaid wages, disa Social Security ben	ation ng whether returns um alimony, spousal sup ation	nts, disability benefits, sick pay, vacat	State: Local: Vorce settlement, property settlement Alimony: Maintenance: Support: Divorce settlement: Property settlement:	portion you own? Do not deduct secured claims or exemptions. \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00 \$0.00

Case 16-34230 Doc 1 Filed 10/26/16 Entered 10/26/16 17:28:01 Desc Main Document Page 18 of 74

Deb	otor 1 Carlos	R.	Ortiz	Case number (if known)	
	First Name	Middle Name	Last Name		
31.	Interests in insurance pol				
	Examples: Health, disability,	, or life insurance; health savi	ngs account (HSA); credit, h	omeowner's, or renter's insurance	
	✓ No				
	=	Compa	any name:	Beneficiary:	Surrender or refund value:
	Yes. Name the insurance		•	·	
	of each policy and list it	s value			
32	Any interest in property to	hat is due you from someor	ne who has died		
J 02.				or are currently entitled to receive	
	property because someone		,,		
	✓ No				
	Yes. Describe				
33.		es, whether or not you hav		demand for payment	
	Examples: Accidents, emplo	oyment disputes, insurance cl	aims, or rights to sue		
	✓ No				
	Yes. Describe				
34.		liquidated claims of every	nature, including counter	claims of the debtor and rights	
	to set off claims				
	✓ No				
	Yes. Describe				
	Tes. Describe				
25	Any financial assets you o	did not alroady list			
35.	Any iniancial assets you c	ald flot all eady list			
	✓ No				
	Yes. Describe				
36.	Add the dollar value of all	l of your entries from Part 4	I, including any entries for	pages you have attached	\$200.00
	for Part 4. Write that num	ber here		>	
	S December Asses December	-! Dalatad Daara	(V 0 II		in Bout 4
Part				an Interest In. List any real estate	in Part 1.
37.	Do you own or have any I	legal or equitable interest in	any business-related pro	perty?	
	No. Go to Part 6.				Current value of the
					portion you own?
	Yes. Go to line 38.				Do not deduct secured claims
					or exemptions
38.	Accounts receivable or co	ommissions you already ear	rned		
	No.				
	✓ No				
	Yes. Describe				
39.	Office equipment, furnish				
	Examples: Business-related	d computers, software, moden	ns, printers, copiers, fax mac	chines, rugs, telephones, desks, chairs, electro	onic devices
	✓ No				
	Yes. Describe				

Case 16-34230 Doc 1 Filed 10/26/16 Entered 10/26/16 17:28:01 Desc Main Document Page 19 of 74

Deb	tor 1 <u>Carlos</u> First Name	R. Middle Name	Ortiz Last Name	Case number (if known)	
40.		quipment, supplies you use		our trade	
	✓ No	quipinoni, cuppino you ucc			
	Yes. Describe				
41	Inventory				
71.	_				
	✓ No Yes. Describe				
	Teo. Describe				
40	Interests in neutnersh	ing as inint ventures			
42.	Interests in partnersh	lips or joint ventures			
	_	Na	me of entity:	% of ownership:	
	Yes. Give specific information about				
	them				
					·
12 (Customor lists mailing	Lists or other compilations			
43. (lists, or other compilations	•		
	✓ No	nclude personally identifiable in	oformation (so defined in 11 LL	S C \$ 101/41A\\\2	
	Tes. Do your lists if	icidue personally identiliable ii	ilonnation (as defined in 11 0	.S.C. 9 101(41A)):	
	☐ No				
	Yes. Desc	ribe			
44.	Any business-related	property you did not already	list		
	✓ No				
	Yes. Give specific	_			
	information				
		all of your entries from Part			
for P	art 5. Write that numbe	r here			
Part		Farm- and Commercian interest in farmland, list it in F		perty You Own or Have an Interest I	n.
46.	Do you own or have a	any legal or equitable intere	st in any farm- or commerci	ial fishing-related property?	
	No. Go to Part 7.				Current value of the portion you own?
	Yes. Go to line 47.				Do not deduct secured
					claims or exemptions
47.	Farm animals				or oxompaono
	Examples: Livestock, po	oultry, farm-raised fish			
	✓ No				
	Yes. Describe				

Case 16-34230 Doc 1 Filed 10/26/16 Entered 10/26/16 17:28:01 Desc Main Document Page 20 of 74

Deb	tor 1	Carlos	R.	Ortiz	Case number (if known)	
40	O	First Name	Middle Name	Last Name		
48.		ops-either growing	or narvested			
	✓	_				
		Yes. Describe				
49.	Fa	rm and fishing equi _l	pment, implements, machinery,	fixtures, and tools of trad	e	
	✓	No				
	F	Yes. Describe				
50	- -		lies showings and food			
50.			lies, chemicals, and feed			
	∠	_				
	L	Yes. Describe				
					,	
51.	An	y farm- and comme	rcial fishing-related property yo	u did not already list		
	✓	No				
		Yes. Describe				
		L				
			l of your entries from Part 6, inc here			
					L	
Part	7.	Describe All Pr	operty You Own or Have a	on Interest in That You	L Did Not List Above	
53.			perty of any kind you did not ali		a Dia Not List Above	
00.			s, country club membership	oddy norr		
	✓	l _{No}				
	Г	Yes. Give specific				
		information				
54. A	dd t	he dollar value of all	of your entries from Part 7. Wr	ite that number here	>	
Part	8:	List the Totals	of Each Part of this Form			
55 I	Dart	1. Total roal octato	line 2		_	
JJ. I	anı	1. Total real estate,	IIIIe 2			
56. p	oart	2 total vehicles, line	5	\$588.00		
57. P	art :	3: Total personal an	d household items, line 15	·		
		-		\$750.00	_	
		4: Total financial ass		\$200.00	<u> </u>	
59. F	art	5: Total business-re	elated property, line 45		<u></u>	
60. F	Part	6: Total farm- and fi	shing-related property, line 52			
61. F	art	7: Total other prope	erty not listed, line 54			
62 7	Tota	l personal property	Add lines 56 through 61			. 04500.00
J 1	. J.u	. perseriai proporty	33 anoagn 01	····· \$1538.00	— Copy personal property total ►	+ \$1538.00
						Ф4500 00
		of all property on S	chedule A/B. Add line 55 + line 6)		\$1538.00
63. T	otai					

Case 16-34230 Doc 1 Filed 10/26/16 Entered 10/26/16 17:28:01 Desc Main Document Page 21 of 74

Fill in this information to identify your case:					
Debtor 1	Carlos First Name	R. Middle Name	Ortiz Last Name		
Debtor 2 (Spouse, if filin	g) First Name	Middle Name	Last Name		
United States I	Bankruptcy Court for the:	Northern	District of Illinois (State)		
Case number (If known)			(Giaic)		

Official Form 106C

Check if this is an amended filing

Schedule C: The Property You Claim as Exempt

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Par	t 1: Identify the Property You Cla	im as Exempt					
1. 2.	Which set of exemptions are you claiming? Check one only, even if your spouse is filling with you. ✓ You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3) ✓ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2) For any property you list on Schedule A/B that you claim as exempt, fill in the information below.						
	Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own Copy the value from Schedule A/B	Amount of the exemption you claim Check only one box for each exemption.	Specific laws that allow exemption			
	Brief description: Chevrolet Impala, 2000 Line from Schedule A/B: 03	\$588.00	\$0 100% of fair market value, up to any applicable statutory limit	735 ILCS 5/12-1001(c)			
	Brief description: TCF Bank Line from Schedule A/B: 17	\$200.00	\$200.00 100% of fair market value, up to any applicable statutory limit	735 ILCS 5/12-1001(b)			
3.	Are you claiming a homestead exemption (Subject to adjustment on 4/01/19 and every) No Yes. Did you acquire the property covered No Yes	3 years after that for ca					

Case 16-34230 Doc 1 Filed 10/26/16 Entered 10/26/16 17:28:01 Desc Main Document Page 22 of 74

Debtor 1	Carlos	R.		Ortiz	Case number (if known)	
	First Name	Middl	e Name	Last Name		
Part 2:	Additional Pa	ge				
line	ef description of on Schedule A/E perty		Current value of the portion you own Copy the value from Schedule A/B		exemption you claim box for each exemption.	Specific laws that allow exemption
Brie	ef			_		735 ILCS 5/12-1001(b)
des	cription:		\$500.00	✓	\$500.00	
	Misc. household and furnishings	•			market value, up to any	_
Line	e from			applicable s	statutory limit	
Sch	nedule A/B:(06				
Brie	ef					735 ILCS 5/12-1001(a)
des	cription:		\$100.00	✓	\$100.00	
	Used clothing			100% of fair	market value, up to any	_
Line	e from				statutory limit	
Sch	nedule A/B:1	<u> 11 </u>				
Brie	ef					735 ILCS 5/12-1001(b)
des	cription:		\$150.00	✓	\$150.00	
	Cell phone			100% of fair	market value, up to any	_
	e from nedule A/B: ()7			statutory limit	

Case 16-34230 Doc 1 Filed 10/26/16 Entered 10/26/16 17:28:01 Desc Main Document Page 23 of 74

			-				
Fill in this	s information to identify your case	2:					
Debtor 1	Carlos	R.	Ortiz				
	First Name	Middle Name	Last Name				
Debtor 2							
(Spouse,	if filing) First Name	Middle Name	Last Name				
United S	tates Bankruptcy Court for the:	Northern	District of Illinois				
0	and the same		(State)				
(If known)							
Offic	ial Form 106D			1		Check if this is an amended filing	
Sche	edule D: Credit	ors Who Ha	ve Claims Secui	red by Pro	perty	12/15	
and case	No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form.						
Part 1:	List All Secured Claims						
2. Li s	st all secured claims. If a credito	or has more than one secui	red claim, list the creditor separately	Column A	Column B	Column C	
	r each claim. If more than one cre uch as possible, list the claims in	•	, list the other creditors in Part 2. As ng to the creditor's name.	Amount of claim Do not deduct the value of collateral.	Value of collateral that supports this claim	Unsecured portion If any	
	aul Ries and Sons editor's Name	Describe the property	that secures the claim:	\$2,000.00	\$588.00	\$1,412.00	
Ct Cit W	ho owes the debt? Check one.	Contingent Unliquidated Disputed Nature of lien. Check a An agreement you r car loan)	Il that apply. Il that apply. Inade (such as mortgage or secured as tax lien, mechanic's lien) a lawsuit ght to offset)				
		vour entries in Column	A on this page. Write that	\$2,000.00			

number here:

Case 16-34230 Doc 1 Filed 10/26/16 Entered 10/26/16 17:28:01 Desc Main Document Page 24 of 74

Fill in	this inform	ation to identify your cas	e:						
Debto	or 1	Carlos	R.	Ortiz		_			
Debto	or 2	First Name	Middle Nam	ne Last N	ame				
		First Name	Middle Nam	ne Last N	ame	-			
United	d States Ba	ankruptcy Court for the:	Northern	District of Illi	nois state)	_			
Case (If know	number wn)			•	,	-			
Offic	cial F	orm 106E/F					Che	ck if this is ar	amended filing
		le E/F: Cre	ditors Wh	no Have I	Insecui	red Claims			4045
								NEW alakasa	12/15
party to 106A/E that are	o any exe B) and on e listed in s in the bo).	and accurate as possi cutory contracts or un- Schedule G: Executory Schedule D: Creditor exes on the left. Attach	expired leases that c ry Contracts and Une rs Who Hold Claims S the Continuation Pa	ould result in a clair xpired Leases (Offic Secured by Propert ige to this page. On	n. Also list exec cial Form 106G). y. If more space	utory contracts on Sc. Do not include any cr is needed, copy the P	hedule A/B: editors with art you need	<i>Property</i> (Or partially sec I, fill it out, n	ficial Form ured claims umber the
1. [Do any cre	editors have priority un	secured claims agai	nst you?					
Į		o to Part 2.							
	✓ Yes. ist all of v	your priority unsecured	d claims. If a creditor h	nas more than one or	iority unsecured o	claim list the creditor ser	parately for ea	nch claim. For	each claim
li n	isted, ident nuch as po Continuatio	ify what type of claim it is possible, list the claims in a on Page of Part 1. If more planation of each type of	s. If a claim has both pri alphabetical order acco e than one creditor hole	iority and nonpriority a ording to the creditor's ds a particular claim,	amounts, list that on the same. If you have list the other cred	claim here and show bot ve more than two priority litors in Part 3.	h priority and	nonpriority ar	nounts. As
							Total claim	Priority amount	Nonpriority amount
2.1	Bobine, La	aquitha		Last 4 digits of ac	count number		\$0.00	\$0.00	\$0.00
	Priority Co	reditor's Name St		When was the del	-	n/a			
	Number				_				
				Contingent	me, the claim is	s: Check all that apply.			
	Springfiel City	d Illinois State	62701 Zip Code	Unliquidated					
	Who inc	urred the debt? Check	•	Disputed					
	<u> </u>	or 1 only		Type of PRIORITY	unsecured clair	m:			
		or 2 only		✓ Domestic supp					
		or 1 and Debtor 2 only		= "	ŭ	u owe the government			
		st one of the debtors and		=	•	ry while you were			
	Chec debt	k if this claim relates to	o a community	intoxicated		,			
		im subject to offset?		Other. Specify					
	✓ No								
	Yes								
		OF HEALTHCARE		Last 4 digits of ac	count number	8031	\$700.00	\$700.00	\$0.00
		reditor's Name Grand Ave E		When was the del	ot incurred?	9/1/2007			
	Number	Street		As of the date you	file, the claim is	s: Check all that apply.			
				Contingent	me, the oldini	s. Oncor all that apply.			
	Springfiel	d Illinois	62704	Unliquidated					
	City	State	Zip Code	Disputed					
		urred the debt? Check or 1 only	one.	Type of PRIORITY	unsecured clair	m:			
	Debto	or 2 only		✓ Domestic supp	ort obligations				
	Debte	or 1 and Debtor 2 only		Taxes and certa	ain other debts you	u owe the government			
	At lea	st one of the debtors and	l another		h or personal inju	ry while you were			
		k if this claim relates to	o a community	intoxicated Other. Specify					
	debt	im subject to offset?							
	✓ No	,							
Offic	Yes	06F/F	Schedu	le E/F: Creditors Wi	no Have Unsecu	ured Claims			page 1

Case 16-34230 Doc 1 Filed 10/26/16 Entered 10/26/16 17:28:01 Desc Main Document Page 25 of 74

Ortiz Debtor 1 Carlos Case number (if known) First Name Middle Name Your PRIORITY Unsecured Claims - Continuation Page Part 1: Priority Total **Nonpriority** After listing any entries on this page, number them beginning with 2.3, followed by 2.4, and so forth. claim amount amount Illinois Department of Revenue \$100.00 \$100.00 \$0.00 Last 4 digits of account number Priority Creditor's Name PO Box 64338 When was the debt incurred? n/a Street Number As of the date you file, the claim is: Check all that apply. Contingent Chicago Illinois 60664 Unliquidated City State Zip Code Disputed Who incurred the debt? Check one. Type of PRIORITY unsecured claim: Debtor 1 only Debtor 2 only Domestic support obligations Debtor 1 and Debtor 2 only Taxes and certain other debts you owe the government At least one of the debtors and another Claims for death or personal injury while you were intoxicated Check if this claim relates to a community ✓ Other. Specify Is the claim subject to offset? **✓** No ☐ Yes IRS 1 \$10,000.00 \$10,000.00 \$0.00 Last 4 digits of account number Priority Creditor's Name When was the debt incurred? PO Box 7346 Street Number As of the date you file, the claim is: Check all that apply. Contingent Pennsylvania 19101 Philadelphia Unliquidated City State Zip Code Disputed Who incurred the debt? Check one. Type of PRIORITY unsecured claim: Debtor 1 only Debtor 2 only Domestic support obligations Debtor 1 and Debtor 2 only Taxes and certain other debts you owe the government At least one of the debtors and another Claims for death or personal injury while you were intoxicated Check if this claim relates to a community Other. Specify debt Is the claim subject to offset? **✓** No Yes Marquita Brim C/O Illinois Department of \$0.00 \$500.00 (\$500.00) Last 4 digits of account number Healthcare and Family Services Priority Creditor's Name When was the debt incurred? n/a 36 South Wabash Avenue Number As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Chicago Illinois 60603 Disputed City State Who incurred the debt? Check one. Type of PRIORITY unsecured claim: Debtor 1 only ✓ Domestic support obligations Debtor 2 only Taxes and certain other debts you owe the government Debtor 1 and Debtor 2 only Claims for death or personal injury while you were At least one of the debtors and another intoxicated Other. Specify Check if this claim relates to a community debt Is the claim subject to offset? **✓** No ☐ Yes

Case 16-34230 Doc 1 Filed 10/26/16 Entered 10/26/16 17:28:01 Desc Main Document Page 26 of 74

Debto		titz Case number (if known)
Part 2		
3.	Do any creditors have nonpriority unsecured claims against yo	
	No. You have nothing to report in this part. Submit this form to the	e court with your other schedules.
	✓ Yes.	
		Il order of the creditor who holds each claim. If a creditor has more than one priority
		claim listed, identify what type of claim it is. Do not list claims already included in Part 1. brs in Part 3.If you have more than four priority unsecured claims fill out the Continuation
	Page of Part 2.	The first art only you have more than road priority and could be distributed in
		Total claim
4.1	CAP ONE NA	\$663.00
	Nonpriority Creditor's Name	Last 4 digits of account number
	PO BOX 26625 Number Street	When was the debt incurred?5/1/2012
		As of the date you file, the claim is: Check all that apply.
	RICHMOND Virginia 23261	Contingent
	City State Zip Code	Unliquidated
	Who incurred the debt? Check one.	Disputed
	Debtor 1 only	Type of NONPRIORITY unsecured claim:
	Debtor 2 only	Student loans
	Debtor 1 and Debtor 2 only	Obligations arising out of a separation agreement or divorce
	At least one of the debtors and another	that you did not report as priority claims
	Check if this claim relates to a community debt	Debts to pension or profit-sharing plans, and other similar
	Is the claim subject to offset?	debts ✓ Other. Specify CreditCard
	<u>✓</u> No	V Outor opening
	Yes	
4.2	CAPITAL ONE	- Last 4 digits of account number 7850 \$753.00
	Nonpriority Creditor's Name 11013 W BROAD ST	When was the debt incurred? 5/1/2011
	Number Street	<u> </u>
		As of the date you file, the claim is: Check all that apply. Contingent
	GLEN ALLEN Virginia 23060	
	City State Zip Code Who incurred the debt? Check one.	Unliquidated
	Debtor 1 only	Disputed
	Debtor 2 only	Type of NONPRIORITY unsecured claim:
	Debtor 1 and Debtor 2 only	Student loans
	At least one of the debtors and another	Obligations arising out of a separation agreement or divorce that you did not report as priority claims
	Check if this claim relates to a community debt	Debts to pension or profit-sharing plans, and other similar
	Is the claim subject to offset?	debts
	✓ No	✓ Other. Specify CreditCard
	Yes	
4.3	CAPITAL ONE	- Last 4 digits of account number 0967 \$274.00
	Nonpriority Creditor's Name 11013 W BROAD ST	When was the debt incurred? 6/1/2011
	Number Street	<u> </u>
		As of the date you file, the claim is: Check all that apply.
	GLEN ALLEN Virginia 23060	Contingent
	City State Zip Code Who incurred the debt? Check one.	Unliquidated
	Debtor 1 only	Disputed
	Debtor 2 only	Type of NONPRIORITY unsecured claim:
	Debtor 1 and Debtor 2 only	Student loans
	At least one of the debtors and another	Obligations arising out of a separation agreement or divorce that you did not report as priority claims
	Check if this claim relates to a community debt	Debts to pension or profit-sharing plans, and other similar
	Is the claim subject to offset?	debts Cradit Cord
	✓ No	✓ Other. Specify <u>CreditCard</u>
	Yes	

Case 16-34230 Doc 1 Filed 10/26/16 Entered 10/26/16 17:28:01 Desc Main Document Page 27 of 74

Ortiz Debtor 1 Carlos Case number (if known) First Name Middle Name Last Name Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. **Total claim** 4.4 CAPITAL ONE \$218.00 Last 4 digits of account number Nonpriority Creditor's Name 11013 W BROAD ST When was the debt incurred? 4/1/2011 Number As of the date you file, the claim is: Check all that apply. Contingent **GLEN ALLEN** Virginia 23060 Unliquidated City State Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce At least one of the debtors and another that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt debts Is the claim subject to offset? CreditCard Other. Specify_ **✓** No Yes 4.5 CERASTES, LLC \$1,749.46 Last 4 digits of account number Nonpriority Creditor's Name 2001 WESTERN AVENUE, STE 400 When was the debt incurred? Street As of the date you file, the claim is: Check all that apply. C O WEINSTEIN, PINSON AND RILEY, PS Contingent Unliquidated Washington 98121 Seattle City State Zip Code Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or divorce Debtor 1 and Debtor 2 only that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt Due Other. Specify Is the claim subject to offset? **✓** No Yes **CHASE** \$500.00 Last 4 digits of account number Nonpriority Creditor's Name PO Box 15298 When was the debt incurred? Street Number As of the date you file, the claim is: Check all that apply. Contingent 19850 Wilmington Delaware Unliquidated Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce At least one of the debtors and another that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt debts Is the claim subject to offset? Other. Specify NSF **✓** No

Yes

Case 16-34230 Doc 1 Filed 10/26/16 Entered 10/26/16 17:28:01 Desc Main Document Page 28 of 74

Debto	r 1 Carlos R. Ort		
	First Name Middle Name Las	t Name	
Part 2	Your NONPRIORITY Unsecured Claims - Continu	uation Page	
	After listing any entries on this page, number them beginning	with 4.5, followed by 4.6, and so forth.	Total claim
4.7	City of Chicago Department of Finance	Last 4 digits of account number	\$7,690.40
	Nonpriority Creditor's Name 223 W Jackson Blvd Ste 512	When was the debt incurred?	
	Number Street	As of the date you file, the claim is: Check all that apply.	
	C/O TALAN & KTSANES	Contingent	
	Chicago Illinois 60606		
	City State Zip Code	Unliquidated	
	Who incurred the debt? Check one. Debtor 1 only	Disputed	
	Debtor 2 only	Type of NONPRIORITY unsecured claim:	
	Debtor 1 and Debtor 2 only	Student loans	
	At least one of the debtors and another	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	Check if this claim relates to a community debt	Debts to pension or profit-sharing plans, and other similar debts	
	Is the claim subject to offset?	✓ Other. Specify Due	
	✓ No	_	
	Yes		
4.8	COLLECTION BUREAU OF A Nonpriority Creditor's Name	Last 4 digits of account number1439	\$497.00
	25954 EDÉN LANDING RD	When was the debt incurred? 4/1/2015	
	Number Street	As of the date you file, the claim is: Check all that apply.	
		Contingent	
	HAYWARD California 94545	Unliquidated	
	City State Zip Code Who incurred the debt? Check one.		
	Debtor 1 only	Disputed	
	Debtor 2 only	Type of NONPRIORITY unsecured claim:	
	Debtor 1 and Debtor 2 only	Student loans	
	At least one of the debtors and another	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	Check if this claim relates to a community debt	Debts to pension or profit-sharing plans, and other similar debts	
	Is the claim subject to offset?	✓ 001 Collection; Collecting for	
		ORIGINAL CREDITOR: DS Other. Specify SERVICES OF AMERICA INC	
	Yes	Outon opeons	
4.9	Comcast Nonpriority Creditor's Name	Last 4 digits of account number	\$268.00
	11621 E. Marginal Way # 5	When was the debt incurred?n/a	
	Number Street Bankruptcy Dept	As of the date you file, the claim is: Check all that apply.	
		Contingent	
	Seattle Washington 98168 City State Zip Code	Unliquidated	
	Who incurred the debt? Check one.	Disputed	
	Debtor 1 only	Type of NONPRIORITY unsecured claim:	
	Debtor 2 only Debtor 1 and Debtor 2 only	Student loans	
	At least one of the debtors and another	Obligations arising out of a separation agreement or divorce	
	Check if this claim relates to a community debt	that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar	
	Is the claim subject to offset?	debts	
	No	✓ Other. Specify	

Yes

Case 16-34230 Doc 1 Filed 10/26/16 Entered 10/26/16 17:28:01 Desc Main Document Page 29 of 74

Debtor		Ortiz Case number (if known)	
		ast Name	
Part 2:	Your NONPRIORITY Unsecured Claims - Conti	nuation Page	
	After listing any entries on this page, number them beginning	ing with 4.5, followed by 4.6, and so forth.	Total claim
4.10	ComEd	Last 4 digits of account number	\$1,463.86
	Nonpriority Creditor's Name 3 Lincoln Center	When was the debt incurred?	
	Number Street		
	Bankruptcy Section	As of the date you file, the claim is: Check all that apply.	
	Oakbrook Terrace Illinois 60181	Contingent	
	City State Zip Code	Unliquidated	
	Who incurred the debt? Check one. Debtor 1 only	Disputed	
	Debtor 1 only Debtor 2 only	Type of NONPRIORITY unsecured claim:	
	□ '	Student loans	
	Debtor 1 and Debtor 2 only	Obligations arising out of a separation agreement or divorce	
	At least one of the debtors and another	that you did not report as priority claims	
	Check if this claim relates to a community debt	Debts to pension or profit-sharing plans, and other similar debts	
	Is the claim subject to offset?	✓ Other. Specify Due	
	✓ No	<u> </u>	
	Yes		
4.11	DISCOVERBANK	Last 4 digits of account number 0882	\$978.00
	Nonpriority Creditor's Name POB 15316	When was the debt incurred? 3/1/2012	
	Number Street	<u> </u>	
		As of the date you file, the claim is: Check all that apply.	
	WILMINGTON Delaware 19850	Contingent	
	City State Zip Code	Unliquidated	
	Who incurred the debt? Check one. Debtor 1 only	Disputed	
		Type of NONPRIORITY unsecured claim:	
	Debtor 2 only	Student loans	
	Debtor 1 and Debtor 2 only	Obligations arising out of a separation agreement or divorce	
	At least one of the debtors and another	that you did not report as priority claims	
	Check if this claim relates to a community debt	Debts to pension or profit-sharing plans, and other similar debts	
	Is the claim subject to offset?	✓ Other. Specify CreditCard	
	✓ No	<u> </u>	
	Yes		
1.12	DISCOVERBANK	Last 4 digits of account number 4649	\$895.00
	Nonpriority Creditor's Name POB 15316	When was the debt incurred? 12/1/2011	
	Number Street		
		As of the date you file, the claim is: Check all that apply.	
	WILMINGTON Delaware 19850	Contingent	
	City State Zip Code	Unliquidated	
	Who incurred the debt? Check one. Debtor 1 only	Disputed	
	Debtor 2 only	Type of NONPRIORITY unsecured claim:	
	Debtor 1 and Debtor 2 only	Student loans	
	' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' ' '	Obligations arising out of a separation agreement or divorce	
	At least one of the debtors and another	that you did not report as priority claims	
	Check if this claim relates to a community debt	Debts to pension or profit-sharing plans, and other similar debts	
	Is the claim subject to offset?	✓ Other. Specify <u>CreditCard</u>	
	✓ No	<u> </u>	
	Yes		

Case 16-34230 Doc 1 Filed 10/26/16 Entered 10/26/16 17:28:01 Desc Main Document Page 30 of 74

Debtor		Ortiz Case number (if known)				
		Last Name				
Part 2:	Your NONPRIORITY Unsecured Claims - Cont	tinuation Page				
	After listing any entries on this page, number them begin	ning with 4.5, followed by 4.6, and so forth.	Total claim			
4.13	Gottlieb Memorial Hospital	Last 4 digits of account number	\$500.00			
	Nonpriority Creditor's Name 701 W North Ave	When was the debt incurred?				
	Number Street					
		As of the date you file, the claim is: Check all that apply.				
		Contingent				
	Melrose Park Illinois 60160	Unliquidated				
	City State Zip Code Who incurred the debt? Check one.	Disputed				
	Debtor 1 only	Type of NONPRIORITY unsecured claim:				
	Debtor 2 only	Student loans				
	Debtor 1 and Debtor 2 only	Obligations arising out of a separation agreement or divorce				
	At least one of the debtors and another	that you did not report as priority claims				
	Check if this claim relates to a community debt	Debts to pension or profit-sharing plans, and other similar debts				
	Is the claim subject to offset?	Other. Specify Due				
	✓ No	_				
	Yes					
4.14	IL Tollway		\$2,300.00			
4.14	Nonpriority Creditor's Name	Last 4 digits of account number	φ2,300.00			
	2700 Ogden Ave Number Street	When was the debt incurred?n/a				
	Number Street	As of the date you file, the claim is: Check all that apply.				
	Dayway Own Hilleria 20545	Contingent				
	Downers Grove Illinois 60515 City State Zip Code	Unliquidated				
	Who incurred the debt? Check one.	Disputed				
	Debtor 1 only	Type of NONPRIORITY unsecured claim:				
	Debtor 2 only	Student loans				
	Debtor 1 and Debtor 2 only	Obligations arising out of a separation agreement or divorce				
	At least one of the debtors and another	that you did not report as priority claims				
	Check if this claim relates to a community debt	Debts to pension or profit-sharing plans, and other similar debts				
	Is the claim subject to offset?	✓ Other. Specify Tolls				
	<u>✓</u> No	• Culot. Speakly				
	Yes					
4.15	Northwestern Medical Group	Last 4 digits of account number	\$500.00			
	Nonpriority Creditor's Name 26609 Network place	When was the debt incurred? n/a				
	Number Street					
		As of the date you file, the claim is: Check all that apply.				
	Chicago Illinois 60673	Contingent				
	City State Zip Code	Unliquidated				
	Who incurred the debt? Check one. Debtor 1 only	Disputed				
	Debtor 2 only	Type of NONPRIORITY unsecured claim:				
	Debtor 1 and Debtor 2 only	Student loans				
	At least one of the debtors and another	Obligations arising out of a separation agreement or divorce				
	블	that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar				
	Check if this claim relates to a community debt	debts				
	Is the claim subject to offset?	✓ Other. Specify Medical				
	Yes					

Case 16-34230 Doc 1 Filed 10/26/16 Entered 10/26/16 17:28:01 Desc Main Document Page 31 of 74

Ortiz Debtor 1 Carlos Case number (if known) First Name Middle Name Last Name Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. **Total claim** 4.16 PEOPLES ENGY \$2,455.00 Last 4 digits of account number _ Nonpriority Creditor's Name 200 EAST RANDOLPH When was the debt incurred? Number Street As of the date you file, the claim is: Check all that apply. Contingent 60601 **CHICAGO** Illinois Unliquidated State City Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce At least one of the debtors and another that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt debts Is the claim subject to offset? ✓ Other. Specify InstallmentLoan **✓** No Yes **PNC Bank** 4.17 \$500.00 Last 4 digits of account number Nonpriority Creditor's Name PO Box 15019 When was the debt incurred? Number As of the date you file, the claim is: Check all that apply. Contingent 19850 Wilmington Delaware Unliquidated City State Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce At least one of the debtors and another that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt Is the claim subject to offset? NSF Other. Specify _ **✓** No Yes 4.18 PORTFOLIO RC \$536.00 Last 4 digits of account number Nonpriority Creditor's Name 120 Corporate Boulevard When was the debt incurred? 11/1/2013 Number As of the date you file, the claim is: Check all that apply. Contingent Norfolk Virginia 23502 Unliquidated City State Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce At least one of the debtors and another that you did not report as priority claims Check if this claim relates to a community debt Debts to pension or profit-sharing plans, and other similar debts Is the claim subject to offset? Collection; Collecting for **✓** No ORIGINAL CREDITOR: 08 GE

Yes

Other. Specify_

CAPITAL RETAIL BANK

Case 16-34230 Doc 1 Filed 10/26/16 Entered 10/26/16 17:28:01 Desc Main Document Page 32 of 74

Debtor 1	Carlos	R.	Ortiz	Case number (if known)	
	First Name	Middle Name	Last Name		
Part 2:	Your NONPRIORITY Uns	ecured Claims -	· Continuation Page		
A	After listing any entries on this	page, number them	beginning with 4.5, follo	owed by 4.6, and so forth.	Total claim
4.19	Speedy Cash		Last 4 digit	s of account number	\$500.00
	Nonpriority Creditor's Name		•	·	
_	931 N. Mannheim Rd Number Street		When was	the debt incurred?n/a	
	Number Street		As of the da	ate you file, the claim is: Check all that apply.	
_			Conting	ent	
N	Melrose Park Illinois 60160	Unliquio	dated		
7	City State	Zip Cod	de Dispute	d	
	Who incurred the debt? Check Debtor 1 only	one.		NPRIORITY unsecured claim:	
Li T	≐		Student		
L	Debtor 2 only		=		
	Debtor 1 and Debtor 2 only			ons arising out of a separation agreement or di did not report as priority claims	vorce
Γ	At least one of the debtors and	d another	— '	pension or profit-sharing plans, and other sim	ilor
Ī	Check if this claim relates to	o a community deb		pension or profit-straining plans, and other sim	ıllal
is in the second	s the claim subject to offset?	•	✓ Other. S	Specify Loan	
	✓ No		_		
Ė	Yes				

Case 16-34230 Doc 1 Filed 10/26/16 Entered 10/26/16 17:28:01 Desc Main Document Page 33 of 74

Ortiz Debtor 1 Carlos Case number (if known) First Name Add the Amounts for Each Type of Unsecured Claim Part 4: 6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim. **Total claims** \$700.00 **Total claims** 6a. Domestic support obligations. from Part 1 \$10,000.00 6b. Taxes and certain other debts you owe the government 6b. \$0.00 6c. Claims for death or personal injury while you were intoxicated \$100.00 6d. Other. Add all other priority unsecured claims. Write that amount here. \$10,800.00 6e. Total. Add lines 6a through 6d. 6e. **Total claims** \$0.00 **Total claims** 6f. Student loans from Part 2 6g. Obligations arising out of a separation agreement or \$0.00 divorce that you did not report as priority claims 6h. Debts to pension or profit-sharing plans, and other similar 6h. debts \$23,240.72 6i. Other. Add all other nonpriority unsecured claims. Write that amount here. \$23,240.72 6j. Total. Add lines 6f through 6i. 6j.

Case 16-34230 Doc 1 Filed 10/26/16 Entered 10/26/16 17:28:01 Desc Main Document Page 34 of 74

Fill in this information to identify your case:				
Debtor 1	Carlos	R.	Ortiz	
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse, if filin	g) First Name	Middle Name	Last Name	
United States Bankruptcy Court for the:		Northern	District of Illinois	
(State)				
Case number (If known)	-			

Official Form 106G

Check if this is an
amended filing

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - Yes. Fill in all of the information below even if the contracts or leases are listed on Schedule A/B: Property (Official Form 106A/B).
- 2. List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	Person or company	y with whom you have th	ne contract or lease	State what the contract or lease is for	
2.1	Name			Residential Lease, Other, Year to Year	
	4404 S. Maplewood				
	Number	Street			
	Chicago	Illinois	60632		
	City	State	Zip Code		

Case 16-34230 Doc 1 Filed 10/26/16 Entered 10/26/16 17:28:01 Desc Main Document Page 35 of 74

Fill in this info	ormation to identify your cas	Se:		
Debtor 1	Carlos	R.	Ortiz	
	First Name	Middle Name	Last Name	
Debtor 2	in a) =			
(Spouse, II III	ing) First Name	Middle Name	Last Name	
United States	Bankruptcy Court for the:	Northern	District of Illinois	
			(State)	
Case number (If known)	r			_
				Check if this is an amended filing
<u>Official</u>	Form 106H			
Schedi	ıle H: Your C	odebtors		12/15
✓ No Yes	have any codebtors? (If y		not list either spouse as a code	ebtor.) nmunity property states and territories include Arizona, California,
	ouisiana, Nevada, New Mex . Go to line 3.	rico, Puerto Rico, Texas, Wa	shington, and Wisconsin.)	
Yes	s. Did your spouse, former s	spouse, or legal equivalent li	ve with you at the time?	
✓	No			
	Yes. In which community	state or territory did you live?	? Fill in th	ne name and current address of that person.
	Name of your spouse,	ormer spouse, or legal equiv	valent	-
	Number Street			-
	City	State	Zip Code	-
again as	a codebtor only if that p	erson is a guarantor or co	osigner. Make sure you have	ur spouse is filing with you. List the person shown in line 2 listed the creditor on <i>Schedule D</i> (Official Form 106D), a D, Schedule E/F, or Schedule G to fill out Column 2.

Column 2: The creditor to whom you owe the debt

Check all schedules that apply:

Official Form 106H Schedule H: Your Codebtors page 1

Column 1: Your codebtor

	Case 16-3423			Entered age 36 d		17:28:01	Desc Ma	in
Fill in t	his information to identif	y your case:						
Debtor 1		R. Middle Name	Ortiz Last Name	÷	_			
Debtor 2 (Spouse,		Middle Name	Last Name		_	Check if this is: An amended	l filing	
United S	tates Bankruptcy Court for the:	Northern	District of Illinois		_		nt showing post- of the following	petition chapter 13 date:
Case nur			(State)			MM / DD / YYYY		
Offici	ial Form 106I							
Sche	edule I: Your Inc	come						12/15
Part 1	: Describe Employme	ent	Debtor 1			Debtor 2		
	Fill in your employment information. If you have more than one job.	Employment status	Employed Not Employed			Employed Not Employed		
	attach a separate page with information about additional	Occupation						
	employers. Include part time, seasonal,	Employer's name	Service King A	Auto Body		Mariano's		
	or self-employed work.	Employer's address	2600 N Central Expy Ste 400 Number Street			MS-3000 P.O. Box 473 Number Street		
	Occupation may include student							
	or homemaker, if it applies.		Richardson City	Texas State	75080 Zip Code	Milwaukee City	Wisconsin State	53201 Zip Code
		How long employed there?				1 month		

Part 2: Give Details About Monthly Income

Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated.

If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.

2. List monthly gross wages, salary, and commissions (before all payroll

- deductions.) If not paid monthly, calculate what the monthly wage would be.

 3. Estimate and list monthly overtime pay.
- 4. Calculate gross income. Add line 2 + line 3.

For Debtor 1 For Debtor 2 or non-filing spouse
2. \$3,927.30 \$866.67

3. + \$0.00 4. \$3,927.30 + \$0.00 \$866.67

Case 16-34230 Doc 1 Filed 10/26/16 Entered 10/26/16 17:28:01 Desc Main Document Page 37 of 74

Debtor 1 Carlos		Ortiz	Case number	(if known)	
First Name	Middle Name	Last Name	For Debtor 1	For Debtor 2 or non-filing spouse	
Copy line 4 here		→ 4	\$3,927.30	\$866.67	I
5. List all payroll deductions:					
5a. Tax, Medicare, and Social S	Security deductions	5a	\$700.79	\$166.70	
5b. Mandatory contributions for	or retirement plans	5b	\$0.00	\$0.00	
5c. Voluntary contributions for	r retirement plans	5c	\$0.00	\$0.00	
5d. Required repayments of re	tirement fund loans	5d	\$0.00	\$0.00	
5e. Insurance		5e	\$0.00	\$0.00	
5f. Domestic support obligation	ons	5f	\$0.00	\$0.00	
5g. Union dues		5g	\$0.00	\$0.00	
5h. Other deductions. Specify:		5h. + _	\$0.00 +	\$0.00	
6. Add the payroll deductions. Ad +5h.	d lines 5a + 5b + 5c + 5d + 5e +5f -	+ 5g 6	\$700.79	\$166.70	
7. Calculate total monthly take-ho	ome pay. Subtract line 6 from line 4	. 7. <u> </u>	\$3,226.51	\$699.96	
8. List all other income regularly r	eceived:				
8a. Net income from rental probusiness, profession, or fa	pperty and from operating a irm property and business showing gros:	e			
	ary business expenses, and the total		\$0.00	\$0.00	
8b. Interest and dividends		8b	\$0.00	\$0.00	
dependent regularly receive		а			
Include alimony, spousal supp divorce settlement, and prope	ort, child support, maintenance, rty settlement.	8c	\$0.00	\$0.00	
8d. Unemployment compensate	tion	8d	\$0.00	\$0.00	
8e. Social Security		8e	\$0.00	\$0.00	
assistance that you receive, su	ce that you regularly receive ne value (if known) of any non-cash uch as food stamps (benefits under ssistance Program) or housing				
		8f	\$0.00	\$0.00	
8g. Pension or retirement inco		8g	\$0.00	\$0.00	
8h. Other monthly income. Spe	ecify:	8h. +	\$0.00 +	\$0.00	1
9. Add all other income Add lines 8	8a + 8b + 8c + 8d + 8e + 8f +8g + 8	3h. 9	\$0.00	\$0.00	
10. Calculate monthly income. Add Add the entries in line 10 for Deb	d line 7 + line 9. tor 1 and Debtor 2 or non-filing spo	10	\$3,226.51	\$699.96	= \$3,926.47
relatives.	utions to the expenses that you narried partner, members of your ho ady included in lines 2-10 or amounts	usehold, your deper	.,		
Specify:					11. + \$0.00
12. Add the amount in the last co	lumn of line 10 to the amount in ry of Schedules and Statistical Sumi				12. \$3,926.47
vine that amount on the cuminal	y or correctines and citationed carri	mary or contain Elab	milos ana related Bata	, и к аррисо	Combined monthly income
13. Do you expect an increase or o	decrease within the year after yo	u file this form?			
Yes. Explain:					

Case 16-34230 Doc 1 Filed 10/26/16 Entered 10/26/16 17:28:01 Desc Main Document Page 38 of 74

Fill in this infor	mation to identify your cas	se:				
Debtor 1		R.	Ortiz			
Debior	Carlos First Name	Middle Name	Last Name			
Debtor 2				Check if this is:		
(Spouse, if filin	g) First Name	Middle Name	Last Name	An amended filing	g	
United States	Bankruptcy Court for the:	Northern	District of Illinois (State)	A supplement sh expenses as of the		chapter 13
Case number (If known)						
(ii kiiowii)				MM / DD / YYYY	, 	
Official	Form 106J					
Schedu	le J: Your Ex	nenses				12/15
information. If (if known). Ans		attach another sheet to this	e filing together, both are equally form. On the top of any additiona			nber
1. Is this a joi	nt case?					
✓ No. Go	o to line 2					
Yes. D	oes Debtor 2 live in a so	eparate household?				
_ [No					
	Yes. Debtor 2 must file	e Official Forms 106J-2, Expens	ses for Separate Household of Debt	or 2.		
2. Do you hav		0				
	Debtor 1 and	es. Fill out this information for ach dependent	Dependent's relationship to Debtor 1 or Debtor 2 Child	Dependent's age 8 months	Does depende with you? No. Yes.	ent live
	•					
Part 2: Esti	mate Your Ongoing	Monthly Expenses				
-	of a date after the bank		you are using this form as a supp plemental Schedule J, check the	•	•	e
	-	cash government assistance t on Schedule I: Your Income	-		You	r expenses
	or home ownership exporthe ground or lot. 4.	penses for your residence. In	clude first mortgage payments and		4.	\$450.00
If not inc	luded in line 4:					
4a. Real e	estate taxes				4a	\$0.00
4b. Prope	rty, homeowner's, or rente	r's insurance			4b	\$0.00
4c. Home	maintenance, repair, and u	ıpkeep expenses			4c.	\$0.00
4d. Home	owner's association or cor	ndominium dues			4d.	\$0.00

4d.

Case 16-34230 Doc 1 Filed 10/26/16 Entered 10/26/16 17:28:01 Desc Main Document Page 39 of 74

Case number (if known)

Ortiz

Debtor 1

Carlos

First Name Middle Name Last Name Your expenses 5. Additional mortgage payments for your residence, such as home equity loans \$0.00 5. 6. Utilities: 6a. Electricity, heat, natural gas \$350.00 6a. 6b. Water, sewer, garbage collection \$0.00 6b. 6c. Telephone, cell phone, Internet, satellite, and cable services \$194.00 6c. 6d. Other. Specify: \$0.00 6d 7. Food and housekeeping supplies \$600.00 7. 8. Childcare and children's education costs \$0.00 8. 9. Clothing, laundry, and dry cleaning 9. \$150.00 10. Personal care products and services 10. \$150.00 11. Medical and dental expenses \$100.00 11. 12. Transportation. Include gas, maintenance, bus or train fare. \$325.00 12. Do not include car payments 13. Entertainment, clubs, recreation, newspapers, magazines, and books \$0.00 13. 14. Charitable contributions and religious donations \$0.00 14. Do not include insurance deducted from your pay or included in lines 4 or 20. 15a. Life insurance \$0.00 15a 15b. Health insurance \$0.00 15b 15c. Vehicle insurance 15c \$120.00 15d. Other insurance. Specify: ___ 15d \$0.00 16. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify: \$0.00 16 17. Installment or lease payments: 17a. Car payments for Vehicle 1 17a \$500.00 17b. Car payments for Vehicle 2 17b \$0.00 17c. Other. Specify: \$0.00 17c 17d. Other. Specify: \$0.00 17d 18. Your payments of alimony, maintenance, and support that you did not report as deducted from \$587.00 your pay on line 5, Schedule I, Your Income (Official Form 106I). 18. 19. Other payments you make to support others who do not live with you. Specify: \$0.00 19. 20.Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income. 20a. Mortgages on other property \$0.00 20a 20b. Real estate taxes. \$0.00 20h 20c. Property, homeowner's, or renter's insurance \$0.00 20c 20d. Maintenance, repair, and upkeep expenses. \$0.00 20d 20e. Homeowner's association or condominium dues \$0.00 20e

Case 16-34230 Doc 1 Filed 10/26/16 Entered 10/26/16 17:28:01 Desc Main Document Page 40 of 74

Debtor 1		R.	Ortiz	Case number (if known)		
	First Name	Middle Name	Last Name			
21.Other	. Specify:				21	\$0.00
	ılate your monthly expen	ises.				\$3,526.00
22a. <i>A</i>	Add lines 4 through 21.					\$0.00
22b. C	Copy line 22 (monthly expe		\$3,526.00			
22c. A	add line 22a and 22b. The r	esult is your monthly expens	ses.		22.	
23.Calcu	late your monthly net in	come.				
23a. C	Copy line 12 (your combined	d monthly income) from Sch	edule I.		23a	\$3,926.48
23b. C	Copy your monthly expense	s from line 22 above.			23b	\$3,526.00
	, , ,	nses from your monthly incor	me.			\$400.48
	The result is your monthly r	net income.			23c	
24. Do y o	ou expect an increase or	decrease in your expense	es within the year after you	ı file this form?		
	·					
			n within the year or do you ex nodification to the terms of yo			
√ 1	No					
	/o.o.					
Ц,	⁄es					
	Explain here:					

Case 16-34230 Doc 1 Filed 10/26/16 Entered 10/26/16 17:28:01 Desc Main Document Page 41 of 74

Fill in this information to identify your case:							
Debtor 1	Carlos	R.	Ortiz				
	First Name	Middle Name	Last Name				
Debtor 2							
(Spouse, if filing) First Name		Middle Name	lame Last Name				
United States Bankruptcy Court for the:		Northern	District of Illinois				
Case number			(State)				

Official Form 106Dec

Check if this is an amended filing

Declaration About an Individual Debtor's Schedules

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Par	t1: Sign Below							
	Did you pay or agree to pay someone who is NOT an attorney to help you fill out bankruptcy forms?							
	✓ No							
	Yes. Name of person	Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).						
	Under penalty of perjury, I declare that I have read the summary at that they are true and correct.	nd schedules filed with this declaration and						
×	/s/ Carlos Ortiz	×						
	Signature of Debtor 1	Signature of Debtor 2						
	Date 10/26/2016	Date						
	MM/DD/YYYY	MM/DD/YYYY						

Case 16-34230 Doc 1 Filed 10/26/16 Entered 10/26/16 17:28:01 Desc Main Document Page 42 of 74

Debtor 1	Carlos	R.	Ortiz
	First Name	Middle Name	Last Name
Debtor 2			
(Spouse, if fil	ing) First Name	Middle Name	Last Name
United States	s Bankruptcy Court for the:	Northern	District of Illinois
			(State)
Case numbe	r		
(If known)			

Check if this is an amended filing

Statement of Financial Affairs for Individuals Filing for Bankruptcy

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part	Part 1: Give Details About Your Marital Status and Where You Lived Before								
1.	What	is your curre	nt marital sta	atus?					
		✓ Married Not married							
2.	During	g the last 3 year	ars, have yo	u lived anywhere	other than where you live	now?			
	No Yes. List all of the places you lived in the				ears. Do not include where yo	ou live now.			
	D	ebtor 1:			Dates Debtor 1 lived there	Debtor 2:			Dates Debtor 2 lived there
						Same as [Debtor 1		Same as Debtor 1
	N	Number Street			From	Number Street		From	
	_				To			То	
	C	City	State	Zip Code		City	State	Zip Code	
						Same as [Debtor 1		Same as Debtor 1
	N	lumber Street			From	Number Stree	t		From
					To				To
	C	ity	State	Zip Code		City	State	Zip Code	
					ouse or legal equivalent in Nevada, New Mexico, Puer				mmunity property states and
	✓ No Yes.	. Make sure yo	u fill out Sche	dule H: Your Code	btors (Official Form 106H).				

Case 16-34230 Doc 1 Filed 10/26/16 Entered 10/26/16 17:28:01 Desc Main Document Page 43 of 74

Deb	tor 1		Ortiz		umber (if known)		
		1	Name Last Nam	ne			
Part	2:	Explain the Sources of Your	ncome				
 Did you have any income from employment or from operating a business during this year or the two previous calendar years? Fill in the total amount of income you received from all jobs and all businesses, including part-time activities. If you are filing a joint case and you have income that you receive together, list it only once under Debtor 1. No Yes. Fill in the details. 							
			Debtor 1		Debtor 2		
			Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)	
		rom January 1 of current year until ne date you filed for bankruptcy:	Wages, commissions, bonuses, tips Operating a business	\$43157.15	Wages, commissions, bonuses, tips Operating a business		
		or last calendar year: lanuary 1 to December 31, 2015) YYYY	Wages, commissions, bonuses, tips Operating a business	\$30000.00	Wages, commissions, bonuses, tips Operating a business		
		or the calendar year before that: lanuary 1 to December 31, 2014) YYYY	Wages, commissions, bonuses, tips Operating a business	\$32500.00	Wages, commissions, bonuses, tips Operating a business		
 	nclui cene case	you receive any other income during de income regardless of whether that income fit payments; pensions; rental income; in and you have income that you received each source and the gross income from No Yes. Fill in the details.	come is taxable. Examples of onterest; dividends; money collectogether, list it only once under	other income are alimony; chected from lawsuits; royalties; Debtor 1.	and gambling and lottery winning		
			Debtor 1		Debtor 2		
			Sources of income Describe below.	Gross income from each source (before deductions and exclusions)	Sources of income Describe below.	Gross income from each source (before deductions and exclusions)	
		rom January 1 of current year until he date you filed for bankruptcy:					
		For last calendar year: January 1 to December 31, 2015) YYYY					
		For the calendar year before that: January 1 to December 31, 2014) YYYY					

Case 16-34230 Doc 1 Filed 10/26/16 Entered 10/26/16 17:28:01 Desc Main Document Page 44 of 74

btor 1	Carlos First Name		R. Middle Name	Ortiz Last Name	Case nun	nber (if known)		
2-		rtain Dayman			. Danksuntau			
rt 3:	List Cei	rtain Paymer	its you made E	Before You Filed for	гвапкгиртсу			
Are e	either Deb	otor 1's or Debte	or 2's debts prima	rily consumer debts?				
			Debtor 2 has prinal, family, or househ		Consumer debts are define	d in 11 U.S.C. § 101(8) as "inc	curred by an individual	
	Durin	g the 90 days be	fore you filed for ba	nkruptcy, did you pay any d	creditor a total of \$6,425* or n	nore?		
	No. Go to line 7.							
	Yes. List below each creditor to whom you paid a total of \$6,425* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case.							
	* Sub	ject to adjustmen	t on 4/01/19 and ev	ery 3 years after that for ca	ases filed on or after the date	of adjustment.		
✓	Yes. Debt	or 1 or Debtor 2	or both have pri	marily consumer debts				
	Durin	g the 90 days be	fore you filed for ba	nkruptcy, did you pay any d	creditor a total of \$600 or mor	e?		
	✓ N	No. Go to line 7.						
	Yes. List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case.							
				Dates of payment	Total amount paid	Amount you still owe	Was this payment for	
	Creditor's	Name					Mortgage	
	Number S	treet					Car Credit card	
			_				Loan repayment Suppliers or	
	City	State	Zip Code				vendors Other	
_	Creditor's	Name					Mortgage Car	
	Number S	treet	_				Credit card	
							Loan repayment	
	City	State	Zip Code				Suppliers or vendors	
							Other	
	Creditor's	Name					Mortgage	
	Number S	treet					Car Credit card	
							Loan repayment	
	City	State	Zip Code				Suppliers or vendors	
	City	Sidio	2.p 0000				Other	

Case 16-34230 Doc 1 Filed 10/26/16 Entered 10/26/16 17:28:01 Desc Main Document Page 45 of 74

Debtor 1	Carlos First Name	R. Middle Name	Or Las	tiz et Name	Case number ((if known)
Insid corp ager	lers include your relativ orations of which you a	are an officer, director, per ousiness you operate as a	relatives of any rson in control, or	general partners; par owner of 20% or mo	tnerships of which y ore of their voting se	ho was an insider? /ou are a general partner; curities; and any managing omestic support obligations,
	No Yes. List all payments	to an insider.				
			Dates of payment	Total amount paid	Amount you still owe	Reason for this payment
	Insider's Name					
	Number Street					
_	City State	e Zip Code				
	Insider's Name					
	Number Street					
	City State	e Zip Code				
insid Includ	ler? de payments on debts e No	filed for bankruptcy, die guaranteed or cosigned b hat benefited an insider.		payments or trans	fer any property o	n account of a debt that benefited an
			Dates of payment	Total amount paid	Amount you still owe	Reason for this payment Include creditor's name
						indude creditors name
	Insider's Name					
	Number Street					
-	City State	e Zip Code				
•	Insider's Name					
	Number Street					
	City State	e Zip Code				

Case 16-34230 Doc 1 Filed 10/26/16 Entered 10/26/16 17:28:01 Desc Main Document Page 46 of 74

Debtor 1	1 Carlos First Name	R. Middle Name	Ortiz Last Name	C	Case number (if	known)	
Part 4:	Identify Legal A	ctions, Repossessions	s, and Foreclosure	es			
List	hin 1 year before you	u filed for bankruptcy, were y ding personal injury cases, sma	ou a party in any laws	uit, court actio			
Ħ	Yes. Fill in the details						
		Natu	re of the case	Court or a	agency		Status of the case
	Case title						Pending
	Case number			Court Nam	ne		On appeal
				NumberSt	reet		Concluded
				City	State	Zip Code	
	Case title						Pending
	Case number			Court Nam	ne		On appeal
	Case number			NumberSt	reet		Concluded
				City	State	Zip Code	
	No. Go to line 11. Yes. Fill in the inform	nation below.	Describe the prop	erty		Date	Value of the property
	Creditor's Name						
	November Charact		Explain what happ	ened			
	Number Street		Property was re	epossessed.			
			Property was fo	reclosed.			
	City	State Zip Code	Property was g		or levied		
	Oily	Zip code	Describe the prop		or icvica.	Date	Value of the property
	Creditor's Name		Explain what happ	ened			
	Number Street						
			Property was re				
			Property was fo				
	City	State Zip Code	Property was g		or levied.		

Case 16-34230 Doc 1 Filed 10/26/16 Entered 10/26/16 17:28:01 Desc Main Document Page 47 of 74

Debt	or 1	Carlos First Name	R. Middle Name	Ortiz Last Name	Case number (if known)		
11.		hin 90 days before you filed ounts or refuse to make a pa			ank or financial institution, s	set off any amou	nts from your
	✓	No Yes. Fill in the details.					
				Describe the action the	e creditor took	Date action was taken	Amount
		Creditor's Name					
		Number Street		Last 4 digits of account n	umber: XXXX-		
		City State	Zip Code				
		nin 1 year before you filed fo ointed receiver, a custodian		of your property in the p	oossession of an assignee f	or the benefit of	creditors, a court-
	✓	No Yes					
Part		List Certain Gifts and					
13.	wi	thin 2 years before you filed		ou give any girts with a to	itai vaiue of more than \$600	per person?	
		Yes. Fill in the details for eac Gifts with a total value of n per person		Describe the gifts		Dates you gave the gifts	Value
		Person to Whom You Gave th	e Gift				
		Number Street					
		City State Person's relationship to you	Zip Code				
		Person to Whom You Gave th	e Gift				
		Number Street					
		City State Person's relationship to you	Zip Code				

Case 16-34230 Doc 1 Filed 10/26/16 Entered 10/26/16 17:28:01 Desc Main Document Page 48 of 74

Deb	tor 1	Carlos First Name	R. Middle Name	Ortiz Last Name	Case number (if known		
14.	Wit	hin 2 years before you filed	d for bankruptcy, did	you give any gifts or contril	outions with a total value o	f more than \$600 t	to any charity?
	7	No		you give unly gine or comm			
		Yes. Fill in the details for ea	ch gift or contribution.				
		Gifts or contributions to that total more than \$600		Describe what you con	tributed	Date you contributed	Value
		Charity's Name					
		Number Street					
		City State	Zip Code				
Part	6:	List Certain Losses					
		No Yes. Fill in the details. Describe the property you how the loss occurred		Describe any insurance Include the amount that in ponding insurance claims	e coverage for the loss asurance has paid. List	Date of your loss	Value of property lost
				pending insurance claims A/B: Property.	s on line 33 of S <i>chedule</i>		
	abo	ut seeking bankruptcy or p	oreparing a bankrupt	ou or anyone else acting on cy petition? credit counseling agencies for			
				Description and value of transferred	of any property	Date payment or transfer was made	Amount of payment
		LAW FIRM		Attorney's Fee - 350.00		8/18/2016	\$350.00
		Person Who Was Paid 11101 S. Western Avenue					
		Number Street					
		Chicago Illinois	60643				
		City State	Zip Code				
		Email or website address					
		Person Who Made the Payr	ment, if Not You				
		Person Who Was Paid					
		Number Street					
		City State	Zip Code				
		Email or website address					
		Person Who Made the Payr	nent, if Not You				

Case 16-34230 Doc 1 Filed 10/26/16 Entered 10/26/16 17:28:01 Desc Main Document Page 49 of 74

Deb	tor 1	Carlos	R.	Ortiz	Case number (if known)	
		First Name	Middle Name	Last Name			
17.	help	hin 1 year before you filed fo by you deal with your creditors not include any payment or trans No Yes. Fill in the details.	or to make payments		r behalf pay or transfer	any property to any	one who promised to
	ш	res. I ill ill the details.					
				Description and value of an transferred	y property		Amount of payment
		Person Who Was Paid					
		Number Street					
		City. State	7in Code				
		City State	Zip Code				
		ude both outright transfers and taken sters that you have already listed No Yes. Fill in the details.		rity (such as the granting of a se			Do not include gifts and
				Description and value of ar property transferred		ny property or eceived or debts pai e	Date id transfer was made
		Person Who Received Transf	er				
		Number Street					
		City State Person's relationship to you	Zip Code				
		Person Who Received Transf	er				
		Number Street					
		City State Person's relationship to you	Zip Code				
19.		hin 10 years before you filed ese are often called asset-prote		ou transfer any property to a s	self-settled trust or simi	ilar device of which y	you are a beneficiary?
	V	No Yes. Fill in the details.					
	Ц	103. I III III uie detalis.		Description and value of t	he property transferre	d	Date transfer was made
		Name of trust					

Case 16-34230 Doc 1 Filed 10/26/16 Entered 10/26/16 17:28:01 Desc Main Document Page 50 of 74

Debtor 1	Carlos First Name	R. Middle Name	Ortiz Last Name	Case number (if known)			
Port O.			struments, Safe Deposit B	oves and Storage Units			
Part 8:	List Certain Financia	ai Accounts, in	struments, Safe Deposit B	oxes, and Storage Units			
mo Incli	lithin 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed oved, or transferred? clude checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pens operatives, associations, and other financial institutions.						
✓	No Yes. Fill in the details.						
			Last 4 digits of account number	Type of account or instrument	Date account was closed, sold, moved, or transferred	Last balance before closing or transfer	
	Person Who Was Paid		_ XXXX-	Checking Savings			
	Number Street		_	Money market Brokerage Other			
	City State	Zip Code	_				
	Person Who Was Paid		_ XXXX-	Checking Savings			
	Number Street		_	Money market Brokerage			
			_	Other			
	City State	Zip Code					
	er valuables? No Yes. Fill in the details.	nave within 1 year	before you filed for bankruptcy, a who else had access to it?	Describe the con		Do you still have it?	
	Name of Financial Institut	ion	Name			☐ No ☐ Yes	
	Number Street		Number Street				
	City State	Zin Codo	City State Zi	ip Code			
na Uas	City State	Zip Code	ace other than your home within	4 year hafara yay filad far han	lementare 2		
22. Hav	No	a storage unit or pr	ace other than your nome within	i year before you med for barr	Ki upicy :		
ä	Yes. Fill in the details.		Who else had access to it?	Describe the con	ntents	Do you still have it?	
	Name of Storage Facility		Name			□ No	
	Number Street		Number Street			Yes	
	_		City State Zi	ip Code			
	City State	Zip Code					

Case 16-34230 Doc 1 Filed 10/26/16 Entered 10/26/16 17:28:01 Desc Main Document Page 51 of 74

otor 1		Ortiz		e number (if known)				
	First Name Middle Name	Last Name						
t 9:	Identify Property You Hold or Con-	trol for Someone E	Ise					
Do	you hold or control any property that some	one else owns? Includ	e any property you b	orrowed from, are storing for, or hold i	n trust for			
son	you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trust for meone.							
	N							
$ \underline{V} $	No							
	Yes. Fill in the details.							
		Where is the prope	erty?	Describe the contents	Value			
	Owner's Name	Number Street						
					-			
	Number Street	·						
		City Stat	e Zip Code					
		Only Old	o zip codo					
	City State Zip Code	·						
t 10:	Give Details About Environmenta	I Information						
tha -	ournoss of Part 10, the following definitions and	h.r.						
uie p	ourpose of Part 10, the following definitions appl	y.						
■ E	Environmental law means any federal, state, or l	ocal statute or regulation	concerning pollution, o	contamination, releases of				
h	nazardous or toxic substances, wastes, or mater	rial into the air, land, soil, s	urface water, groundv	vater, or other medium,				
ir	ncluding statutes or regulations controlling the o	cleanup of these substanc	es, wastes, or materia	al.				
_ c	Cita magna any logation facility or property on de	ofinad undar any any irang	antal law whather you	now own aparata or utiliza it				
- 5	Site means any location, facility, or property as de or used to own, operate, or utilize it, including di	•	eritariaw, wrietrier you	Thow own, operate, or utilize it				
	or used to own, operate, or utilize it, including di	sposai sites.						
0	Hazardous material means anything an environn	nental law defines as a ha	zardous waste, hazard	ous substance,				
• <i>F</i>	Hazardous material means anything an environnoxic substance, hazardous material, pollutant, c			ous substance,				
o ■ <i>H</i>	oxic substance, hazardous material, pollutant, c	ontaminant, or similar terr	n.	ous substance,				
o ■ <i>H</i>	·	ontaminant, or similar terr	n.	ous substance,				
o ■ <i>H</i>	oxic substance, hazardous material, pollutant, c	ontaminant, or similar terr	n.	ous substance,				
o ■ <i>F</i> to port a	oxic substance, hazardous material, pollutant, c	contaminant, or similar terr	n. when they occurred.					
o ■ <i>F</i> to port a	oxic substance, hazardous material, pollutant, call notices, releases, and proceedings that you keep any governmental unit notified you that you	contaminant, or similar terr	n. when they occurred.					
o ■ <i>F</i> to port a	oxic substance, hazardous material, pollutant, call notices, releases, and proceedings that you keep any governmental unit notified you that you	contaminant, or similar terr	n. when they occurred.					
o ■ <i>F</i> to port a	oxic substance, hazardous material, pollutant, call notices, releases, and proceedings that you keep any governmental unit notified you that you	contaminant, or similar terr	n. when they occurred.					
o ■ <i>F</i> to port a	oxic substance, hazardous material, pollutant, call notices, releases, and proceedings that you keep any governmental unit notified you that you	contaminant, or similar terr	n. when they occurred. entially liable under o		Date of			
o ■ <i>F</i> to port a	oxic substance, hazardous material, pollutant, call notices, releases, and proceedings that you keep any governmental unit notified you that you	contaminant, or similar terr now about, regardless of vo ou may be liable or pote	n. when they occurred. entially liable under o	or in violation of an environmental law?				
o ■ <i>F</i> to port a	oxic substance, hazardous material, pollutant, call notices, releases, and proceedings that you keep any governmental unit notified you that you	contaminant, or similar terr now about, regardless of vo ou may be liable or pote	n. when they occurred. entially liable under o	or in violation of an environmental law?	Date of			
o ■ <i>F</i> to port a	oxic substance, hazardous material, pollutant, call notices, releases, and proceedings that you keep any governmental unit notified you that you	contaminant, or similar terr now about, regardless of vo ou may be liable or pote	n. when they occurred. entially liable under o	or in violation of an environmental law?	Date of			
o ■ <i>F</i> to port a	oxic substance, hazardous material, pollutant, call notices, releases, and proceedings that you keep any governmental unit notified you that you not have the company of th	contaminant, or similar terr now about, regardless of v ou may be liable or pote Governmental unit Governmental unit	n. when they occurred. entially liable under o	or in violation of an environmental law?	Date of			
o ■ <i>F</i> to port a	oxic substance, hazardous material, pollutant, call notices, releases, and proceedings that you kes any governmental unit notified you that you not have seen in the details.	contaminant, or similar terr now about, regardless of v ou may be liable or pote Governmental unit	n. when they occurred. entially liable under o	or in violation of an environmental law?	Date of			
o ■ <i>F</i> to port a	oxic substance, hazardous material, pollutant, call notices, releases, and proceedings that you keep any governmental unit notified you that you not have the company of th	contaminant, or similar terr now about, regardless of v ou may be liable or pote Governmental unit Governmental unit	n. when they occurred. entially liable under o	or in violation of an environmental law?	Date of			
o ■ <i>F</i> to port a	oxic substance, hazardous material, pollutant, call notices, releases, and proceedings that you keep any governmental unit notified you that you not have the company of th	contaminant, or similar terr now about, regardless of v ou may be liable or pote Governmental unit Governmental unit	n. when they occurred. entially liable under o	or in violation of an environmental law?	Date of			
o ■ <i>F</i> to port a	oxic substance, hazardous material, pollutant, coall notices, releases, and proceedings that you know any governmental unit notified you that you have not not the same of site. Name of site Number Street	contaminant, or similar terr now about, regardless of v ou may be liable or pote Governmental unit Governmental unit Number Street	n. when they occurred. entially liable under o	or in violation of an environmental law?	Date of			
o ■ <i>F</i> to port a	oxic substance, hazardous material, pollutant, call notices, releases, and proceedings that you keep any governmental unit notified you that you not have the company of th	contaminant, or similar terr now about, regardless of v ou may be liable or pote Governmental unit Governmental unit Number Street	n. when they occurred. entially liable under o	or in violation of an environmental law?	Date of			
o F to Has	oxic substance, hazardous material, pollutant, coall notices, releases, and proceedings that you know any governmental unit notified you that you have any governmental unit notified you that you have a sany governmental unit notified you have a sany governmental unit notif	contaminant, or similar terr now about, regardless of v ou may be liable or pote Governmental unit Governmental unit Number Street City State	n. when they occurred. entially liable under o	or in violation of an environmental law?	Date of			
o F to troport as Hass	oxic substance, hazardous material, pollutant, coall notices, releases, and proceedings that you know any governmental unit notified you that you have not not the same of site. Name of site Number Street	contaminant, or similar terr now about, regardless of v ou may be liable or pote Governmental unit Governmental unit Number Street City State	n. when they occurred. entially liable under o	or in violation of an environmental law?	Date of			
o F to troport as Hass	oxic substance, hazardous material, pollutant, coall notices, releases, and proceedings that you know any governmental unit notified you that you have some some some some some some some som	contaminant, or similar terr now about, regardless of v ou may be liable or pote Governmental unit Governmental unit Number Street City State	n. when they occurred. entially liable under o	or in violation of an environmental law?	Date of			
o • F tcoport a Hass	oxic substance, hazardous material, pollutant, coall notices, releases, and proceedings that you know any governmental unit notified you that you have a sany governmental unit notified you that you have you. No Yes. Fill in the details. Name of site Number Street City State Zip Code we you notified any governmental unit of any had been details.	contaminant, or similar terr now about, regardless of v ou may be liable or pote Governmental unit Governmental unit Number Street City State	n. when they occurred. entially liable under o	or in violation of an environmental law?	Date of			
o F to Has	oxic substance, hazardous material, pollutant, coall notices, releases, and proceedings that you know any governmental unit notified you that you have some some some some some some some som	contaminant, or similar terr now about, regardless of v ou may be liable or pote Governmental unit Governmental unit Number Street City State	n. when they occurred. entially liable under o	or in violation of an environmental law?	Date of			
o • F tooort a	oxic substance, hazardous material, pollutant, coall notices, releases, and proceedings that you know any governmental unit notified you that you have a sany governmental unit notified you that you have you. No Yes. Fill in the details. Name of site Number Street City State Zip Code we you notified any governmental unit of any had been details.	contaminant, or similar terr now about, regardless of v ou may be liable or pote Governmental unit Governmental unit Number Street City State	n. when they occurred. entially liable under of Example 2 Example 2 Example 2 Example 2 Example 3 Example 3 Example 4 Example 4 Example 4 Example 4 Example 4 Example 4 Example 5 Example 6 Example 7 Exampl	or in violation of an environmental law?	Date of			
o F to Has	oxic substance, hazardous material, pollutant, coall notices, releases, and proceedings that you know any governmental unit notified you that you have a sany governmental unit notified you that you have you. No Yes. Fill in the details. Name of site Number Street City State Zip Code we you notified any governmental unit of any had been details.	contaminant, or similar term now about, regardless of vocumental units. Governmental units. Number Street. City States.	n. when they occurred. entially liable under of Example 2 Example 2 Example 2 Example 2 Example 3 Example 3 Example 4 Example 4 Example 4 Example 4 Example 4 Example 4 Example 5 Example 6 Example 7 Exampl	or in violation of an environmental law? Environmental law, if you know it	Date of notice			
o F to troport as Hass	oxic substance, hazardous material, pollutant, coall notices, releases, and proceedings that you know any governmental unit notified you that you have a sany governmental unit notified you that you have you. No Yes. Fill in the details. Name of site Number Street City State Zip Code we you notified any governmental unit of any had been details.	contaminant, or similar term now about, regardless of vocumental units. Governmental units. Number Street. City States.	n. when they occurred. entially liable under of Example 2 Example 2 Example 2 Example 2 Example 3 Example 3 Example 4 Example 4 Example 4 Example 4 Example 4 Example 4 Example 5 Example 6 Example 7 Exampl	or in violation of an environmental law? Environmental law, if you know it	Date of notice			
o F to troport as Hass	oxic substance, hazardous material, pollutant, coall notices, releases, and proceedings that you know any governmental unit notified you that you have a sany governmental unit notified you that you have you. No Yes. Fill in the details. Name of site Number Street City State Zip Code we you notified any governmental unit of any had been details.	contaminant, or similar term now about, regardless of vocumental units. Governmental units. Number Street. City States.	n. when they occurred. entially liable under of Example 2 Example 2 Example 2 Example 2 Example 3 Example 3 Example 4 Example 4 Example 4 Example 4 Example 4 Example 4 Example 5 Example 6 Example 7 Exampl	or in violation of an environmental law? Environmental law, if you know it	Date of notice			
o F to troport as Hass	oxic substance, hazardous material, pollutant, coall notices, releases, and proceedings that you know any governmental unit notified you that you know yes. Fill in the details. No No No Yes. Fill in the details. Name of site Number Street City State Zip Code ve you notified any governmental unit of any yes. Fill in the details.	Governmental unit Number Street City State	n. when they occurred. entially liable under of Example 2 Example 2 Example 2 Example 2 Example 3 Example 3 Example 4 Example 4 Example 4 Example 4 Example 4 Example 4 Example 5 Example 6 Example 7 Exampl	or in violation of an environmental law? Environmental law, if you know it	Date of notice			
o F to troport a	oxic substance, hazardous material, pollutant, coall notices, releases, and proceedings that you know any governmental unit notified you that you know yes. Fill in the details. No No No Yes. Fill in the details. Name of site Number Street City State Zip Code ve you notified any governmental unit of any yes. Fill in the details.	Governmental unit Number Street City State	n. when they occurred. entially liable under of Example 2 Example 2 Example 2 Example 2 Example 3 Example 3 Example 4 Example 4 Example 4 Example 4 Example 4 Example 4 Example 5 Example 6 Example 7 Exampl	or in violation of an environmental law? Environmental law, if you know it	Date of notice			
o F to troport a	oxic substance, hazardous material, pollutant, coall notices, releases, and proceedings that you know any governmental unit notified you that you know yes. Fill in the details. No No Yes. Fill in the details. Name of site City State Zip Code ve you notified any governmental unit of any yes. Fill in the details. No Yes. Fill in the details.	Governmental unit City State Governmental unit Governmental unit City State Governmental unit	n. when they occurred. entially liable under of Example 2 Example 2 Example 2 Example 2 Example 3 Example 3 Example 4 Example 4 Example 4 Example 4 Example 4 Example 4 Example 5 Example 6 Example 7 Exampl	or in violation of an environmental law? Environmental law, if you know it	Date of notice			
o • F tcoport a Hass	oxic substance, hazardous material, pollutant, coall notices, releases, and proceedings that you know any governmental unit notified you that you know yes. Fill in the details. No No Yes. Fill in the details. Name of site City State Zip Code ve you notified any governmental unit of any yes. Fill in the details. No Yes. Fill in the details.	contaminant, or similar terrenow about, regardless of the course of the	n. when they occurred. entially liable under of e Zip Code material?	or in violation of an environmental law? Environmental law, if you know it	Date of notice			
o F to troport a	oxic substance, hazardous material, pollutant, coall notices, releases, and proceedings that you know any governmental unit notified you that you know yes. Fill in the details. No No Yes. Fill in the details. Name of site City State Zip Code ve you notified any governmental unit of any yes. Fill in the details. No Yes. Fill in the details.	Governmental unit City State Governmental unit Governmental unit City State Governmental unit	n. when they occurred. entially liable under of e Zip Code material?	or in violation of an environmental law? Environmental law, if you know it	Date of notice			
o F to troport a	oxic substance, hazardous material, pollutant, coall notices, releases, and proceedings that you know any governmental unit notified you that you know yes. Fill in the details. No No Yes. Fill in the details. Name of site City State Zip Code ve you notified any governmental unit of any yes. Fill in the details. No Yes. Fill in the details.	contaminant, or similar terrenow about, regardless of the course of the	n. when they occurred. entially liable under of e Zip Code material?	or in violation of an environmental law? Environmental law, if you know it	Date of notice			

Case 16-34230 Doc 1 Filed 10/26/16 Entered 10/26/16 17:28:01 Desc Main Document Page 52 of 74

Deb	tor 1	Carlos		R.	Ortiz	Case n	number (if known)	
		First Name		Middle Name	Last Name			
26. Have you been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders.								
	✓	No						
		Yes. Fill in the deta	ils.					
					Court or agency		Nature of the case	Status of the
					0 ,			case
		Case title						— 5 .:
					Court Name			Pending
					Courtivanie			On appeal
		Case number			Number Street			Concluded
								Concluded
					City State	Zip Code		
Dort	. 11.	Givo Dotails A	hout Vour	Rusinoss o	r Connections to An	v Business		
rail	111:	Give Details A	bout four	Busiliess O	Connections to Ai	ly busilless		
27.	Witl	nin 4 vears before	vou filed for	bankruptcy, die	d vou own a business or	have any of the fol	lowing connections to any business	?
		_	-			•	-	
				-	, profession, or other activit		part-time	
		A member of a	a limited liabilit	y company (LLC	c) or limited liability partners	ship (LLP)		
		A partner in a	partnership					
		An officer, dire	ctor, or mana	ging executive of	f a corporation			
		An owner of at	t least 5% of th	ne voting or equi	ty securities of a corporation	n		
		No. None of the abo	ave applies G	o to Port 12				
	Ħ				ils below for each business			
	ш	res. Crieck all triat of	арріу авоче а	na ili in the deta				ban Da mat
					Describe the natu	ire of the business	Employer Identification no include Social Security nu	
								iniber of frint.
		Business Name					EIN:	
		Number Street					Dates business existed	
					Name of account	ant or bookkeeper		
		City	State	Zip Code			From To	
		•		·				
					Deceribe the net	ure of the business	Employer Identification n	umbar Da nat
					Describe the natu	re of the business	Employer Identification no include Social Security nu	
		Business Name					EIN:	
		Number Street					Dates business existed	
					Name of account	ant or bookkeeper		
		City	State	Zip Code			From To	
		-		•				
					Departure the water	uro of the business	Employer Identification	umbar De zet
					Describe the natu	ire of the business	Employer Identification no include Social Security nu	
		Business Name					EIN:	
		Number Street					Dates business existed	
					Name of account	ant or bookkeeper		
		City	State	Zip Code			From To	
		,						

Case 16-34230 Doc 1 Filed 10/26/16 Entered 10/26/16 17:28:01 Desc Main Document Page 53 of 74

Debtor	1 Carlos		R.	Ortiz	Case number (if known)
	First Name		Middle Name	Last Name	
c -	reditors, or	s before you filed fo other parties.	or bankruptcy, did yo	ou give a financial statemer	nt to anyone about your business? Include all financial institutions,
				Date issued	
	Name			MM/DD/YYYY	
	Number	Street		_	
	City	State	Zip Code	_	
Part 1	2: Sign B	olow			
		se can result in fine	s up to \$250,000, or		y, or obtaining money or property by fraud in connection with a ears, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.
		Signature of Debto			Signature of Debtor 2
		· ·			
		Date 10/26/2016			Date 10/26/2016
Di	d you attach	additional pages to	Your Statement of	Financial Affairs for Individ	duals Filing for Bankruptcy (Official Form 107)?
V	No				
	Yes				
	103				
Di	d you pay or	agree to pay some	one who is not an at	ttorney to help you fill out b	ankruptcy forms?
✓	No				
Ē	Yes. Name	of person			Attach the Bankruptcy Petition Preparer's Notice,
	_				Declaration, and Signature (Official Form 119).

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy,

and

Your debts are primarily consumer debts.

Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of the Bankruptcy Code:

- Chapter 7 Liquidation
- Chapter 11 Reorganization
- Chapter 12 Voluntary repayment plan for family farmers or fishermen
- Chapter 13 Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7: Liquidation

	\$245	filing fee
	\$75	administrative fee
+	\$15	trustee surcharge
	\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

- most taxes:
- most student loans;
- domestic support and property settlement obligations;

- most fines, penalties, forfeitures, and criminal restitution obligations; and
- certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

- fraud or theft:
- fraud or defalcation while acting in breach of fiduciary capacity;
- intentional injuries that you inflicted; and
- death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A-1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A-2).

If your income is above the median for your state, you must file a second form - the *Chapter 7 Means Test Calculation* (Official Form 122A-2). The calculations on the form - sometimes called the *Means Test* - deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

	\$1,167	filing fee
+	\$550	administrative fee
	\$1,717	total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

	\$275	total fee
+	\$75	administrative fee
	\$200	filing fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total foo

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

- domestic support obligations,
- most student loans,
- certain taxes.
- debts for fraud or theft,
- debts for fraud or defalcation while acting in a fiduciary capacity,
- most criminal fines and restitution obligations,
- certain debts that are not listed in your bankruptcy papers,
- certain debts for acts that caused death or personal injury, and
- certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court

For more information about the documents and their deadlines, go to:

http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

- If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury either orally or in writing in connection with a bankruptcy case, you may be fined, imprisoned, or both.
- All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together - called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days **before** you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from:

http://www.justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit 20AndDebtCounselors.aspx

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF ILLINOIS

RIGHTS AND RESPONSIBILITIES AGREEMENT BETWEEN CHAPTER 13 DEBTORS AND THEIR ATTORNEYS

(Court-Approved Retention Agreement, Use for cases filed on or after September 19, 2016)

Chapter 13 gives debtors important rights, such as the right to keep property that could otherwise be lost through repossession or foreclosure, but Chapter 13 also puts burdens on debtors, such as the burden of making complete and truthful disclosures of their financial situation. It is important for debtors who file a Chapter 13 bankruptcy case to understand their rights and responsibilities in bankruptcy. In this connection, the advice of an attorney is often crucial. Debtors are entitled to certain services from their attorneys, but debtors also have responsibilities to their attorneys. In order to assure that debtors and their attorneys understand their rights and responsibilities in the Chapter 13 process, the judges of the Bankruptcy Court for the Northern District of Illinois have approved this agreement, setting out the rights and responsibilities of both debtors in Chapter 13 and their attorneys, including how their attorneys will be paid for their services in the Chapter 13 case. By signing this agreement, debtors and their attorneys accept these responsibilities.

The Bankruptcy Code may require a debtor's attorney to provide the debtor with certain documents and agreements at the start of the representation. The terms of this court-approved agreement take the place of any conflicting provision in an earlier agreement. This agreement cannot be modified in any way by other agreements. Any provision of another agreement between the debtors and the attorney that conflicts with this agreement is void.

A. BEFORE THE CASE IS FILED

THE DEBTOR AGREES TO:

- 1. Discuss with the attorney the debtor's objectives in filing the case.
- 2. Provide the attorney with full, accurate and timely information, financial and otherwise, including properly documented proof of income.

THE ATTORNEY AGREES TO:

- 1. Personally counsel the debtor regarding the advisability of filing either a Chapter 13 or a Chapter 7 case, discuss both procedures (as well as non-bankruptcy options) with the debtor, and answer the debtor's questions.
- 2. Personally explain to the debtor that the attorney is being engaged to represent the debtor on all matters arising in the case, as required by Local Bankruptcy Rule and explain how and when the attorney's fees and the trustee's fees are determined and paid.
- 3. Personally review with the debtor and sign the completed petition, plan, statements, and schedules, as well as all amendments thereto, whether filed with the petition or later. (The schedules may be initially prepared with the help of clerical or paralegal staff of the attorney's office, but personal attention of the attorney is required for the review and signing.)
- 4. Timely prepare and file the debtor's petition, plan, statements, and schedules.
- 5. Explain to the debtor how, when, and where to make all necessary payments, including both payments that must be made directly to creditors and payments that must be made to the Chapter 13 trustee, with particular attention to housing and vehicle payments.

Case 16-34230 Doc 1 Filed 10/26/16 Entered 10/26/16 17:28:01 Desc Main Document Page 59 of 74

6. Advise the debtor of the need to maintain appropriate insurance.

B. AFTER THE CASE IS FILED

THE DEBTOR AGREES TO:

- 1. Make the required payments to the trustee and to whatever creditors are being paid directly, or, if required payments cannot be made, to notify the attorney immediately.
- 2. Appear punctually at the meeting of creditors (also called the "341 meeting") with recent proof of income and a picture identification card. (If the identification card does not include the debtor's social security number, the debtor must also bring to the meeting a social security card.) The debtor must be present in time for check-in and, when the case is called, for the actual examination.
- 3. Notify the attorney of any change in the debtor's address or telephone number.
- 4. Inform the attorney of any wage garnishments or liens or levies on assets that occur or continue after the filing of the case.
- 5. Contact the attorney immediately if the debtor loses employment, has a significant change in income, or experiences any other significant change in financial situation (such as serious illness, marriage, divorce or separation, lottery winnings, or an inheritance).
- 6. Notify the attorney if the debtor is sued or wishes to file a lawsuit (including divorce.)
- 7. Inform the attorney if any tax refunds to which the debtor is entitled are seized or not received when due from the IRS or Illinois Department of Revenue.
- 8. Contact the attorney before buying, refinancing, or selling real property, and before entering into any loan agreement.
- 9. Supply the attorney with copies of all tax returns filed while the case is pending.

THE ATTORNEY AGREES TO:

- 1. Advise the debtor of the requirement to attend the meeting of creditors, and notify the debtor of the date, time, and place of the meeting.
- 2. Inform the debtor that the debtor must be punctual and, in the case of a joint filing, that both spouses must appear at the same meeting.
- 3. Provide knowledgeable legal representation for the debtor at the meeting of creditors (in time for check-in and the actual examination) and, unless excused by the trustee, for the confirmation hearing.

Case 16-34230 Doc 1 Filed 10/26/16 Entered 10/26/16 17:28:01 Desc Main Document Page 60 of 74

- 4. If the attorney will be employing another attorney to attend the 341 meeting or any court hearing, personally explain to the debtor in advance, the role and identity of the other attorney and provide the other attorney with the file in sufficient time to review it and properly represent the debtor.
- 5. Timely submit to the Chapter 13 trustee properly documented proof of income for the debtor, including business reports for self-employed debtors.
- 6. Timely respond to objections to plan confirmation and, where necessary, prepare, file, and serve an amended plan.
- 7. Timely prepare, file, and serve any necessary statements, amended statements, and schedules and any change of address, in accordance with information provided by the debtor.
- 8. Monitor all incoming case information (including, but not limited to, Order Confirming Plan, Notice of Intent to Pay Claims, and 6-month status reports) for accuracy and completeness. Contact the trustee promptly regarding any discrepancies.
- 9. Be available to respond to the debtor's questions throughout the term of the plan.
- 10. Prepare, file, and serve timely modifications to the plan after confirmation, when necessary, including modifications to suspend, lower, or increase plan payments.
- 11. Prepare, file, and serve necessary motions to buy or sell property and to incur debt.
- 12. Object to improper or invalid claims.
- 13. Timely respond to the Chapter 13 trustee's motions to dismiss the case, such as for payment default, or unfeasibility, and to motions to increase the percentage payment to unsecured creditors.
- 14. Timely respond to motions for relief from stay.
- 15. Prepare, file, and serve all appropriate motions to avoid liens.
- 16. Prepare, file, and serve a notice of conversion to Chapter 7, pursuant to \$ 1307(a) of the Bankruptcy Code and Local Bankruptcy Rule 1017-1.
- 17. Provide any other legal services necessary for the administration of the case.

C. TERMINATION OR CONVERSION OF THE CASE AFTER ENTRY OF AN ORDER APPROVING FEES AND EXPENSES

- 1. Approved fees and expenses paid under the provisions set out below are generally not refundable in the event that the case is dismissed prior to its completion, unless the dismissal is due to a failure by the attorney to comply with the duties set out in this agreement. If such a dismissal is due to a failure by the attorney, the court may order a refund of fees on motion by the debtor.
- 2. If the case is dismissed after approval of the fees and expenses but before payment of all allowed fees and expenses, the order entered by the Bankruptcy Court allowing the fees and expenses is not a judgment against the debtor for the unpaid fees and expenses based on contract law or otherwise.
- 3.If the case is converted to a case under Chapter 7 after approval of the fees and expenses under this agreement but before the payment of all fees and expenses, the attorney will be entitled to an administrative claim in the Chapter 7 case for any unpaid fees and expenses, pursuant to § 726(b) of the Bankruptcy Code, plus any conversion fee the attorney pays on behalf of the debtor.

D. RETAINERS AND PREVIOUS PAYMENTS

- 1. The attorney may receive a retainer or other payment before filing the case but may not receive fees directly from the debtor after the filing of the case. Unless the following provision is checked and completed, any retainer received by the attorney will be treated as a security retainer, to be placed in the attorney's client trust account until approval of a fee application by the court.
- The attorney seeks to have the retainer received by the attorney treated as an advance payment retainer, which allows the attorney to take the retainer into income immediately. The attorney hereby provides the following further information and representations:
- (a) The special purpose for the advance payment retainer and why it is advantageous to the debtor is as follows:

 Client understands that any funds that client is rendering to The Semrad Law Firm, LLC as part of the advance payment retainer shall immediately become the property of The Semrad Law Firm, LLC in exchange for a commitment by The Semrad Law Firm, LLC to provide the legal services described above. Said funds will be deposited into the main bank account owned by The Semrad Law Firm, LLC and will be used for general expense of the firm. Client further understands that it is ordinarily the client's option to deposit funds with an attorney that shall remain client's property as security for future services. However, The Semrad Law Firm, LLC does not represent clients under such a security retainer because the preparation of a bankruptcy cases requires many disparate tasks and functions for the attorney and support staff; some of which require legal expertise while other may be only ministerial in nature. Client further understands that the benefit that client is receiving under the fee arrangement is the commitment of The Semrad Law Firm, LLC to perform any and all work reasonably necessary to represent client's interest absent any extraordinary circumstance.
- (b) The retainer will not be held in a client trust account and will become property of the attorney upon payment and will be deposited into the attorney's general account;
- (c) The retainer is a flat fee for the services to be rendered during the chapter 13 case and will be applied for such services without the need for the attorney to keep detailed hourly time records for the specific services performed for the debtor;
- (d) Any portion of the retainer that is not earned or required for expenses will be refunded to the client; and
- (e) The attorney is unwilling to represent the debtor without receiving an advanced payment retainer because of the nature of the chapter 13 case, the fact that the great majority of services for such case are performed prior to its filing, and the risks associated with the representation of debtors in bankruptcy cases in general.
- 2. In any application for compensation, the attorney must disclose to the court any fees or other compensation paid by the debtor to the attorney for any reason within the one year before the case filing, including the date(s) any such fees were paid.

E. CONDUCT AND DISCHARGE

- 1. Improper conduct by the attorney. If the debtor disputes the sufficiency or quality of the legal services provided or the amount of the fees charged by the attorney, the debtor may file an objection with the court and request a hearing.
- 2. *Improper conduct by the debtor.* If the attorney believes that the debtor is not complying with the debtor's responsibilities under this agreement or is otherwise engaging in improper conduct, the attorney may apply for a court order allowing the attorney to withdraw from the case.
- 3. Discharge of the attorney. The debtor may discharge the attorney at any time.

F. ALLOWANCE AND PAYMENT OF ATTORNEYS' FEES AND EXPENSES

- 1. Any attorney retained to represent a debtor in a Chapter 13 case is responsible for representing the debtor on all matters arising in the case unless otherwise ordered by the court. For all of the services outlined above, the attorney will be paid a flat fee of \$4,000.00 For all of the services outlined above, the attorney will be paid a flat fee of \$4,000.00
- 2. In addition, the debtor will pay the filing fee in the case and other expenses of \$371.76

Case 16-34230 Doc 1 Filed 10/26/16 Entered 10/26/16 17:28:01 Desc Main Document Page 62 of 74

- 3. Before signing this agreement, the attorney has received, \$350.00 toward the flat fee, leaving a balance due of \$3,650.00; and \$61.76 for expenses, leaving a balance due of \$4,021.76
- 4. In extraordinary circumstances, such as extended evidentiary hearings or appeals, the attorney may apply to the court for additional compensation for these services. Any such application must be accompanied by an itemization of the services rendered, showing the date, the time expended, and the identity of the attorney performing the services. The debtor must be served with a copy of the application and notified of the right to appear in court to object.

Debtor(s)	Attorney for Debtor(s)
	/s/ Megan Holmes
/s/ Carlos Ortiz	
Signed:	
Date: 10/26/2016	

Do not sign if the fee amounts at top of this page are blank.

leegutobe

Case 16-34230 Doc 1 Filed 10/26/16 Entered 10/26/16 17:28:01 Desc Main Document Page 63 of 74

B 203 (12/94)

UNITED STATES BANKRUPTCY COURT

Northern District of Illinois

In re		Northern Distri	Case No.				
-	Carlos R. Ortiz ; Debtor		Case No.	(If known)			
	Deptol		Chapter	Chapter 13			
	DISCLOSURE OF	COMPENSATIO	N OF ATTORNEY FO	OR DEBTOR			
1.	Pursuant to 11 U.S.C. § 329(a) at that compensation paid to me wit services rendered or to be rende is as follows:	thin one year before the filing	of the petition in bankruptcy, or	agreed to be paid to me, for			
	For legal services, I have agreed	to accept		\$4,000.0			
	Prior to the filing of this statemen	nt I have received		\$350.0			
	Balance Due			\$3,650.0			
2.	The source of the compensation	paid to me was:					
	D ebtor	Other (specify	y)				
3.	The source of the compensation	paid to me is:					
	✓ Debtor	Other (specify	y)				
4.	I have not agreed to share the above-disclosed compensation with any other person unless they are members and associates of my law firm.						
	I have agreed to share the above-disclosed compensation with a other person or persons who are not members or associates of my law firm. A copy of the agreement, together with a list of the names of the people sharing in the compensation, is attached.						
5.	In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including: a. Analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether to file a petition ir bankruptcy;						
	b. Preparation and filing of any petition, schedules, statements of affairs and plan which may be required;						
	c. Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings thereof;						
	d. Representation of the debtor in adversary proceedings and other contested bankruptcy matters;						
6.	By agreement with the debtor(s),	the above-disclosed fee doe	s not include the following servic	es:			
		CERTIFIC	ATION				
	I certify that the foregoing is a conne debtor(s) in this bankruptcy produced		ement or arrangement for payme	ent to me for representation			
	10/26/2016		/s/ Megan Holmes				
	Date		Signature of Attorney				
			Semrad Law Firm				
			Name of law firm				

Case 16-34230 Doc 1 Filed 10/26/16 Entered 10/26/16 17:28:01 Desc Main Document Page 64 of 74

UNITED STATES BANKRUPTCY COURT

Northern District of Illinois

In re: _	Ortiz, Carlos R.;	Case No	Case No		
	Debtor(s)	Chapter.	Chapter13		
	VERIFICATIO	N OF CREDITOR MAT	RIX		
	The above named Debtors hereby verify that the	e attached list of creditors is true	e and correct to the best of their know	wledge.	
Date:	10/26/2016	/s/ Ortiz, Carlos	R.		
		Ortiz, Carlos R Signature of De			
		/s/			
		Signature of Joi	nt Debtor		

PEOPLES ENGY 200 EAST RANDOLPH CHICAGO, IL 60601

COLLECTION BUREAU OF A 25954 EDEN LANDING RD HAYWARD , CA 94545

Paul Ries and Sons 3940 W Armitage Ave Chicago , IL 60647

Marquita Brim C/O Illinois Department of Healthcare and Family Services 36 South Wabash Avenue Chicago , IL 60603

Bobine, Laquitha 509 S 6th St Springfield , IL 62701

IL DEPT OF HEALTHCARE 100 South Grand Ave E Springfield , IL 62704

DISCOVERBANK POB 15316 WILMINGTON , DE 19850

DISCOVERBANK POB 15316 WILMINGTON , DE 19850

CAPITAL ONE Po Box 85015 Richmond , VA 23285

CAP ONE NA PO BOX 26625 RICHMOND, VA 23261

PORTFOLIO RC 120 Corporate Boulevard Norfolk , VA 23502

CAPITAL ONE Po Box 85015 Case 16-34230 Doc 1 Filed 10/26/16 Entered 10/26/16 17:28:01 Desc Main Document Page 66 of 74

Richmond , VA 23285

CAPITAL ONE Po Box 85015 Richmond , VA 23285

City of Chicago Department of Finance 223 W Jackson Blvd Ste 512 C/O TALAN & KTSANES Chicago , IL 60606

CERASTES, LLC 2001 WESTERN AVENUE, STE 400 C O WEINSTEIN, PINSON AND RILEY, PS Seattle , WA 98121

ComEd 3 Lincokln Cetre c/o Sabrina Copelan Villa Park , IL 60181

IRS 1 PO Box 7346 Philadelphia , PA 19101

Illinois Department of Revenue PO Box 64338 Chicago , IL 60664

Speedy Cash Po Box 101928 Birmingham , AL 35210

Comcast 11621 E. Marginal Way # 5 Bankruptcy Dept Seattle , WA 98168

IL Tollway 2700 Ogden Ave Downers Grove , IL 60515

CHASE PO Box 15298 Wilmington , DE 19850

PNC Bank PO Box 2155 Rocky Mount , NC 27802

Northwestern Medical Group 26609 Network place Chicago , IL 60673 Case 16-34230 Doc 1 Filed 10/26/16 Entered 10/26/16 17:28:01 Desc Main Document Page 68 of 74

Case 16-34230 Doc 1 Filed 10/26/16 Entered 10/26/16 17:28:01 Desc Main Document Page 69 of 74

Gottlieb Memorial Hospital 701 W North Ave Melrose Park , IL 60160

Case 16-34230 Doc 1 Filed 10/26/16 Entered 10/26/16 17:28:01 Desc Main Document Page 70 of 74

Debtor 1 Carlos First Name	R. Middle Name	Ortiz Last Name	Case number (if known)			
16. What kind of debts do you have?	 "incurred by an individual primarily for a personal, family, or household purpose." No. Go to line 16b. Yes. Go to line 17. 16b. Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment. No. Go to line 16c. 					
	Yes. Go to line 17. 16c. State the type of debts you owe that are not consumer debts or business debts.					
17. Are you filing under Chapter 7? Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available for distribution to unsecured creditors?	Yes. I am filing under expenses are pa	der Chapter 7. Go to line Chapter 7. Do you estima id that funds will be avail		erty is excluded and administrative d creditors?		
18. How many creditors do you estimate that you owe?	✓ 1-49☐ 50-99☐ 100-199☐ 200-999	5,001	0-5,000 -10,000 01-25,000	25,001-50,000 50,001-100,000 More than 100,000		
19. How much do you estimate your assets to be worth?	\$0-\$50,000 \$50,001-\$100,000 \$100,001-\$500,000 \$500,001-\$1 million	\$10,0 \$50,0	0,001-\$10 million 00,001-\$50 million 00,001-\$100 million 000,001-\$500 million	\$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion		
²⁰ · How much do you estimate your liabilities to be?	\$0-\$50,000 \$50,001-\$100,000 \$100,001-\$500,000 \$500,001-\$1 million	\$10,0 \$50,0	0,001-\$10 million 00,001-\$50 million 00,001-\$100 million 000,001-\$500 million	\$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion		
Part 7: Sign Below						
For you	correct. If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceunder Chapter 7.					
To the state of th	If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fi out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b).					
	I request relief in accordance with the chapter of title 11, United States Code, specified in this petition. I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571 /s/ Carlos Ortiz Signature of Debtor 1					
		26/2016 MM / DD / YYYY	Executed on	MM / DD / YYYY		

Case 16-34230 Doc 1 Filed 10/26/16 Entered 10/26/16 17:28:01 Desc Main Document Page 71 of 74

Fill in this information to identify your case:						
Debtor 1	Carlos	R.	Ortiz			
	First Name	Middle Name	Last Name			
Debtor 2						
(Spouse, if filing)	First Name	Middle Name	Last Name			
United States E	Bankruptcy Court for the:	Northern	District of Illinois			
			(State)			
Case number						
(If known)						

Official Form 106Dec

Check if this is an amended filing

Declaration About an Individual Debtor's Schedules

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Par	1: Sign Below					
	Did you pay or agree to pay someone who is NOT an attorney to help you fill out bankruptcy forms?					
VIII	☑ No					
	Yes. Name of person	Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).				
	Under penalty of perjury, I declare that I have read the summary that they are true and correct.	and schedules filed with this declaration and				
×	/s/ Carlos Ortiz	Signature of Debtor 2				
	Date 10/26/2016 MM/DD/YYYY	Date MM/DD/YYYY				

Case 16-34230 Doc 1 Filed 10/26/16 Entered 10/26/16 17:28:01 Desc Main Document Page 72 of 74

	Carlos First Name	R. Middle Name	Ortiz	Case number (if known)
28. Wit	eritalise et alliande au anna anna en	iled for bankruptcy, did	Last Name you give a financial state	ment to anyone about your business? Include all financial institutions
☑	No Yes. Fill in the details b	elow.		
			Date issued	
	Name		MM/DD/YYYY	
	Number Street			
	City Sta	ate Zip Code		
Part 12:	Sign Below	his Statement of Finance	ial Affaire and any attach	ments, and I declare under penalty of perjury that the answers are
true a	kruptcy case can result /s/ Carlos	d that making a false st t in fines up to \$250,000	atement, concealing pro	ments, and I declare under penalty of perjury that the answers are berty, or obtaining money or property by fraud in connection with o 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.
a bar	ikruptcy case can result	d that making a false st t in fines up to \$250,000	atement, concealing pro	perty, or obtaining money or property by fraud in connection with
true a	kruptcy case can result /s/ Carlos	d that making a false st t in fines up to \$250,000 s Ortiz	atement, concealing pro	perty, or obtaining money or property by fraud in connection with o 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.
a bar	/s/ Carlos Signature of	d that making a false st tin fines up to \$250,000 c Ortiz Debtor 1	atement, concealing proj , or imprisonment for up to	perty, or obtaining money or property by fraud in connection with o 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. Signature of Debtor 2
a bar Did y	/s/ Carlos Signature of	d that making a false st tin fines up to \$250,000 c Ortiz Debtor 1	atement, concealing proj , or imprisonment for up to	perty, or obtaining money or property by fraud in connection with to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. Signature of Debtor 2 Date 10/26/2016
Did y	/s/ Carlos Signature of Date 10/26/2 Duattach additional page do es	d that making a false st t in fines up to \$250,000 Ortiz Debtor 1 2016 ges to Your Statement of	atement, concealing proj , or imprisonment for up to	Signature of Debtor 2 Date 10/26/2016 parks of bankruptcy (Official Form 107)?

Case 16-34230 Doc 1 Filed 10/26/16 Entered 10/26/16 17:28:01 Desc Main Document Page 73 of 74

Debt	or 1	Carlos First Name	R. Middle Name	Ortiz	Case number (if known)	
4.0			entra an area and more and an area and an area and an area.	Last Name	er statissemmentet et et statiggjet i Spaj pringen, en i van skappe open men en open proper i van de	en e
10,		Iculate the median family inco			pps:	
		a. Fill in the state in which you liv		Illinois	_	
	16k	b. Fill in the number of people in	your household.	3	_	
	160	c. Fill in the median family income	e for your state and size			\$72,429.00
		household using the link specified in the s	eparate instructions for t		ind a list of applicable median income amounts, go online may also be available at the bankruptcy clerk's office.	
17.	Hov	w do the lines compare?	•		,	
	17a	a. Line 15b is less than or eq under 11 U.S.C. § 1325(b)	ual to line 16c. On the to (/3). Go to Part 3. Do N	op of page 1 of th IOT fill out <i>Calcula</i>	nis form, check box 1, <i>Disposable income is not determined ation of Disposable Income</i> (Official Form 122C-2).	
	17t	b. Line 15b is more than line U.S.C. § 1325(b)(3). Go to form, copy your current m	Part 3 and fill out Ca	Iculation of Disp	heck box 2, Disposable income is determined under 11 osable Income (Official Form 122C-2). On line 39 of that	
Part	3:	Calculate Your Commitme	ent Period Under 11	U.S.C. §1325((b)(4)	
18.	Cop	py your total average monthly i	income from line 11.			\$2,526.19
19.					e is not filing with you, and you contend that calculating the f your spouse's income, copy the amount from line 13.	
	19a	a. If the marital adjustment does r	not apply, fill in 0 on line	19a.		-\$0.00
	19b	o. Subtract line 19a from line 1	8.			\$2,526.19
20.	Cal	Iculate your current monthly in	come for the year. Foll	low these steps:		
	20a	a. Copy line 19b.				\$2,526.19
		Multiply by 12 (the number of r	nonths in a year).			x 12
•	20b	o. The result is your current month	hly income for the year fo	or this part of the	form.	\$30,314.28
	20c	c. Copy the median family income	e for your state and size	of household fron	n line 16c.	\$72,429.00
21.	Hov	w do the lines compare?				
	☑	Line 20b is less than line 20c. U commitment period is 3 years.	nless otherwise ordered So to Part 4.	by the court, on t	he top of page 1 of this form, check box 3, The	
		Line 20b is more than or equal t 4, <i>The commitment period is 5</i> j	o line 20c. Unless othen vears. Go to Part 4.	wise ordered by th	e court, on the top of page 1 of this form, check box	
Part 4	4: {	Sign Below				
		By signing here. I declare under	nenalty of perium that th	e information on t	this statement and in any attachments is true and correct.	
		by signing field, i decide under	perially or perjuy that the	e infolitiation on t	and statement and in any attachments is true and conect.	
		X /s/ Carlos Ortiz	Nund ()	le s	¢	
		Signature of Debto		2	Signature of Debtor 2	
		Date 10/26/2016			Date	
		MM/DD/YYYY			MM/DD/YYYY	
		If you checked 17a, do NOT fill of If you checked 17b, fill out Form above.	out or file Form 122C-2. 122C-2 and file it with t	this form. On line	39 of that form, copy your current monthly income from line	14

Case 16-34230 Doc 1 Filed 10/26/16 Entered 10/26/16 17:28:01 Desc Main Document Page 74 of 74

UNITED STATES BANKRUPTCY COURT

Northern District of Illinois

In re:	Ortiz, Carlos R.;	Case No	**************************************
***************************************	Debtor(s)	·········	
		Chapter.	Chapter13
	VERIFICA	TION OF CREDITOR MATR	iX.
The knowledge.	e above named Debtors hereby verify tha	at the attached list of creditors is true	and correct to the best of their
Date:	10/26/2016	/s/ Ortiz, Carlos R. Ortiz, Carlos R. Signature of Debtor	Carlos Outes
		/s/ Signature of Joint D	Debtor